FILE NOW: FILING FEE AFTER MAY 1ST IS $550.00

PROFIT CORPORATION ANNUAL REPORT **1998**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 30 1998 8:00am
Secretary of State

DOCUMENT # **P32118** **(2)**

1. Corporation Name
CHIRON VISION CORPORATION

Principal Place of Business	Mailing Address
555 WEST ARROW HIGHWAY CLAREMONT GA 91711 US	4560 HORTON STREET LAW DEPT EMERYVILLE CA 94608 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21	26 One Bausch + Lomb Place
22 Suite, Apt #, etc	27 Suite, Apt #, etc. c/o Tax Dept.
23 City & State	28 City & State Rochester, NY
24 Zip / 25 Country	29 Zip 14604-2701 / 30 Country USA

3. Date Incorporated or Qualified: 11/07/1990

4. FEI Number: 58-1681282 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE ______ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☒ DELETE	1.1 TITLE	PD	☐ Change ☒ Addition
NAME	PENHOET, EDWARD E		1.2 NAME	Edstrom, Hakan S.	
STREET ADDRESS	4560 HORTON ST.		1.3 STREET ADDRESS	555 West Arrow Highway	
CITY-ST-ZIP	EMERYVILLE CA		1.4 CITY-ST-ZIP	Claremont, CA 91711	
TITLE	VCFO	☒ DELETE	2.1 TITLE	VPD	☐ Change ☒ Addition
NAME	CUMMINS, ED		2.2 NAME	McCluski, Stephen C.	
STREET ADDRESS	555 WEST ARROW HIGHWAY		2.3 STREET ADDRESS	One Bausch + Lomb Place	
CITY-ST-ZIP	CLAREMONT CA		2.4 CITY-ST-ZIP	Rochester, NY 14604-2701	
TITLE	DT	☒ DELETE	3.1 TITLE	AT	☐ Change ☒ Addition
NAME	WINGER, DENNIS L		3.2 NAME	Resnick, Alan H.	
STREET ADDRESS	4560 HORTON ST.		3.3 STREET ADDRESS	One Bausch + Lomb Place	
CITY-ST-ZIP	EMERYVILLE CA		3.4 CITY-ST-ZIP	Rochester, NY 14604-2701	
TITLE	S	☒ DELETE	4.1 TITLE	S	☐ Change ☒ Addition
NAME	GREEN, WILLIAM		4.2 NAME	Geisel, Jean F.	
STREET ADDRESS	4560 HORTON STREET		4.3 STREET ADDRESS	One Bausch + Lomb Place	
CITY-ST-ZIP	EMERYVILLE CA		4.4 CITY-ST-ZIP	Rochester, NY 14604-2701	
TITLE	D	☒ DELETE	5.1 TITLE	D	☐ Change ☒ Addition
NAME	LINK, WILLIAM		5.2 NAME	Stiles, Robert B.	
STREET ADDRESS	555 WEST ARROW HIGHWAY		5.3 STREET ADDRESS	One Bausch + Lomb Place	
CITY-ST-ZIP	CLAREMONT CA		5.4 CITY-ST-ZIP	Rochester, NY 14604-2701	
TITLE		☐ DELETE	6.1 TITLE	See Attached Schedule	☐ Change ☒ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (10/97)

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Alan H. Resnick, Assist. Treas. 4/22/98 (716)338-6000

CHIRON VISION CORPORATION
ROCHESTER, NEW YORK
NAMES/ADDRESSES OF OFFICERS

Name	*Business Address*
Hakan S. Edstrom President	Bausch & Lomb Surgical 555 West Arrow Highway Claremont, CA 91711
Stephen C. McCluski Vice President	Bausch & Lomb Incorporated One Bausch & Lomb Place Rochester, NY 14604-2701
Robert Gallagher Treasurer	Bausch & Lomb Surgical 55 West Arrow Highway Claremont, CA 91711
Alan H. Resnick Assistant Treasurer	Bausch & Lomb Incorporated One Bausch & Lomb Place Rochester, NY 14604-2701
Jean F. Geisel Secretary	Bausch & Lomb Incorporated One Bausch & Lomb Place Rochester, NY 14604-2701
Mark M. Tomaino Assistant Secretary	Bausch & Lomb Incorporated One Bausch & Lomb Place Rochester, NY 14604-2701

CHIRON VISION CORPORATION

ROCHESTER, NEW YORK

NAMES /ADDRESSES OF DIRECTORS

Name	*Business Address*
Hakan S. Edstrom	Bausch & Lomb Surgical 555 West Arrow Highway Claremont, CA 91711
Stephen C. McCluski	Bausch & Lomb, Inc. One Bausch & Lomb Place Rochester, NY 14604-2701
Robert B. Stiles	Bausch & Lomb, Inc. One Bausch & Lomb Place Rochester, NY 14604-2701