

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 14, 1999 8:00 am
Secretary of State

04-14-1999 90116 040 ***150.00

DOCUMENT # P93000086744

1. Corporation Name

JOSEPH S. SCHLESINGER AND ASSOCIATES, O.D., P.A.

Principal Place of Business

C/O EYEMASTERS
5100 N 9 AVE
PENSACOLA FL 32504

Mailing Address

C/O EYEMASTERS
5100 N 9 AVE
PENSACOLA FL 32504

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/08/1993

4. FEI Number
63-1106397

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 the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 2401 Executive Plaza
Suite, Apt. #, etc.

22 Suite 1-A

23 Pensacola, FL Escambia

24 32504 Country
25 Escambia

2a. Mailing Address

26 2401 Executive Plaza
Suite, Apt. #, etc.

27 Suite 1-A

28 Pensacola, FL

29 32504 Country
30 Escambia

9. Name and Address of Current Registered Agent

FERGUSON, MICHAEL L.
4300 BAYOU BLVD
SUITES 12 & 13
PENSACOLA FL 32503

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

Joseph S. Schlesinger
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME SCHLESINGER, JOSEPH S
STREET ADDRESS 5100 N 9 AVE
CITY-ST-ZIP PENSACOLA FL 32504

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

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NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☒ Change ☐ Addition

2401 Executive Plaza Suite 1-A

Pensacola, FL 32504

☐ Change ☐ Addition

☐ Change ☐ Addition

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SIGNATURE:

Joseph S. Schlesinger
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-09-99 850-484-3066

Date

Daytime Phone #

CR2E034 (11/98)