

P95000044209

TRANSMITTAL LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

700001502527
-05/31/95--01104--020
*****78.75 *****78.75

SUBJECT: VISION DEALERS SERVICES CORPORATION
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of Incorporation and a check for :

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

Additional Copy Required

FROM:

Rosanne E. Bosse
Name (printed or typed)

3438 East LAKE Rd. #14664
Address

Palm Harbor, Fl. 34685
City, State & Zip

813- 781- 5488
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

55 MAY 31 PM 1:41

FILED

SDG

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Vision Dealer Services Corporation

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

3438 East LAKE Road #14664
PALM HARBOR, FL. 34685

FILED
SECRETARY OF STATE
TALLAHASSEE FLORIDA
JAN 31 PM 1:41

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100 (one hundred)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Rosanne E. Bosse
4164 Boyd Lane
Palm Harbor FL. 34685

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Rosanne E. Bosse
4164 Boyd Lane
Palm Harbor, Fl. 34685

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

24 day of May, 19 95.

Rosanne E. Bosse President
Signature

Signature

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: Vision Dealer Services Corporation

2. The name and address of the registered agent and office is:

Rosanne E. Bosse
(NAME)

4164 Boyd Lane
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

Palm Harbor, FL 34685
(CITY/STATE/ZIP)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Rosanne E. Bosse
(SIGNATURE)

5/24/95
(DATE)

FILED
95 MAY 31 PM 1:44
TALLAHASSEE FLORIDA

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$275 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

**AMENDED
FILING**

96 OCT 18 PM 3:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

000001984530--B
-10/24/96--01003--006
*****35.00 *****35.00

PERMIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra H. Montano
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P 95000044209 (1)**

VISION DEALER SERVICES CORPORATION

3438 EAST LAKE RD
#14664
PALM HARBOR, FL 34685
(SAME)

21. Date of Previous Filing	22. Mailing Address
22. Date of Report	23. Date of Report
23. City & State	24. City & State
24. Zip	25. Zip

3. Date Incorporated or Qualified	3a. Date of Last Report
4. FEI Number	Applied For Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required
6. Election Campaign Financing Fund Contribution	\$5.00 May Be Added to Fees
7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes.	☒ Yes ☐ No

9. Name and Address of Current Registered Agent
**MICHAEL W. HARTER
201 LAFAYETTE BLVD.
OLDSMAR, FL 34677**

10. Name and Address of New Registered Agent
11. Name
12. Street Address (P.O. Box Number is Not Acceptable)
13. City
14. State
15. Zip Code

11. I, the undersigned, being a resident of, and duly qualified to act as, a registered agent of, hereby certify that the above-named corporation submits this statement for the purpose of changing its registered agent, and I, the undersigned, hereby accept the appointment as registered agent of the corporation, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____

12. OFFICERS AND DIRECTORS		
1. NAME	2. STREET ADDRESS	3. CITY & STATE
4. ZIP	5. NAME	6. STREET ADDRESS
7. CITY & STATE	8. ZIP	9. NAME
10. STREET ADDRESS	11. CITY & STATE	12. ZIP
13. NAME	14. STREET ADDRESS	15. CITY & STATE
16. ZIP	17. NAME	18. STREET ADDRESS
19. CITY & STATE	20. ZIP	21. NAME
22. STREET ADDRESS	23. CITY & STATE	24. ZIP
25. NAME	26. STREET ADDRESS	27. CITY & STATE
28. ZIP	29. NAME	30. STREET ADDRESS
31. CITY & STATE	32. ZIP	33. NAME
34. STREET ADDRESS	35. CITY & STATE	36. ZIP
37. NAME	38. STREET ADDRESS	39. CITY & STATE
40. ZIP	41. NAME	42. STREET ADDRESS
43. CITY & STATE	44. ZIP	45. NAME
46. STREET ADDRESS	47. CITY & STATE	48. ZIP
49. NAME	50. STREET ADDRESS	51. CITY & STATE
52. ZIP	53. NAME	54. STREET ADDRESS
55. CITY & STATE	56. ZIP	57. NAME
58. STREET ADDRESS	59. CITY & STATE	60. ZIP
61. NAME	62. STREET ADDRESS	63. CITY & STATE
64. ZIP	65. NAME	66. STREET ADDRESS
67. CITY & STATE	68. ZIP	69. NAME
70. STREET ADDRESS	71. CITY & STATE	72. ZIP
73. NAME	74. STREET ADDRESS	75. CITY & STATE
76. ZIP	77. NAME	78. STREET ADDRESS
79. CITY & STATE	80. ZIP	81. NAME
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85. NAME	86. STREET ADDRESS	87. CITY & STATE
88. ZIP	89. NAME	90. STREET ADDRESS
91. CITY & STATE	92. ZIP	93. NAME
94. STREET ADDRESS	95. CITY & STATE	96. ZIP
97. NAME	98. STREET ADDRESS	99. CITY & STATE
100. ZIP	101. NAME	102. STREET ADDRESS
103. CITY & STATE	104. ZIP	105. NAME
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109. NAME	110. STREET ADDRESS	111. CITY & STATE
112. ZIP	113. NAME	114. STREET ADDRESS
115. CITY & STATE	116. ZIP	117. NAME
118. STREET ADDRESS	119. CITY & STATE	120. ZIP
121. NAME	122. STREET ADDRESS	123. CITY & STATE
124. ZIP	125. NAME	126. STREET ADDRESS
127. CITY & STATE	128. ZIP	129. NAME
130. STREET ADDRESS	131. CITY & STATE	132. ZIP
133. NAME	134. STREET ADDRESS	135. CITY & STATE
136. ZIP	137. NAME	138. STREET ADDRESS
139. CITY & STATE	140. ZIP	141. NAME
142. STREET ADDRESS	143. CITY & STATE	144. ZIP
145. NAME	146. STREET ADDRESS	147. CITY & STATE
148. ZIP	149. NAME	150. STREET ADDRESS
151. CITY & STATE	152. ZIP	153. NAME
154. STREET ADDRESS	155. CITY & STATE	156. ZIP
157. NAME	158. STREET ADDRESS	159. CITY & STATE
160. ZIP	161. NAME	162. STREET ADDRESS
163. CITY & STATE	164. ZIP	165. NAME
166. STREET ADDRESS	167. CITY & STATE	168. ZIP
169. NAME	170. STREET ADDRESS	171. CITY & STATE
172. ZIP	173. NAME	174. STREET ADDRESS
175. CITY & STATE	176. ZIP	177. NAME
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217. NAME	218. STREET ADDRESS	219. CITY & STATE
220. ZIP	221. NAME	222. STREET ADDRESS
223. CITY & STATE	224. ZIP	225. NAME
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229. NAME	230. STREET ADDRESS	231. CITY & STATE
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253. NAME	254. STREET ADDRESS	255. CITY & STATE
256. ZIP	257. NAME	258. STREET ADDRESS
259. CITY & STATE	260. ZIP	261. NAME
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265. NAME	266. STREET ADDRESS	267. CITY & STATE
268. ZIP	269. NAME	270. STREET ADDRESS
271. CITY & STATE	272. ZIP	273. NAME
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277. NAME	278. STREET ADDRESS	279. CITY & STATE
280. ZIP	281. NAME	282. STREET ADDRESS
283. CITY & STATE	284. ZIP	285. NAME
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289. NAME	290. STREET ADDRESS	291. CITY & STATE
292. ZIP	293. NAME	294. STREET ADDRESS
295. CITY & STATE	296. ZIP	297. NAME
298. STREET ADDRESS	299. CITY & STATE	300. ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1. NAME	2. STREET ADDRESS	3. CITY & STATE
4. ZIP	5. NAME	6. STREET ADDRESS
7. CITY & STATE	8. ZIP	9. NAME
10. STREET ADDRESS	11. CITY & STATE	12. ZIP
13. NAME	14. STREET ADDRESS	15. CITY & STATE
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91. CITY & STATE	92. ZIP	93. NAME
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97. NAME	98. STREET ADDRESS	99. CITY & STATE
100. ZIP	101. NAME	102. STREET ADDRESS
103. CITY & STATE	104. ZIP	105. NAME
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109. NAME	110. STREET ADDRESS	111. CITY & STATE
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148. ZIP	149. NAME	150. STREET ADDRESS
151. CITY & STATE	152. ZIP	153. NAME
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157. NAME	158. STREET ADDRESS	159. CITY & STATE
160. ZIP	161. NAME	162. STREET ADDRESS
163. CITY & STATE	164. ZIP	165. NAME
166. STREET ADDRESS	167. CITY & STATE	168. ZIP
169. NAME	170. STREET ADDRESS	171. CITY & STATE
172. ZIP	173. NAME	174. STREET ADDRESS
175. CITY & STATE	176. ZIP	177. NAME
178. STREET ADDRESS	179. CITY & STATE	180. ZIP
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208. ZIP	209. NAME	2010. STREET ADDRESS
211. CITY & STATE	212. ZIP	213. NAME
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217. NAME	218. STREET ADDRESS	219. CITY & STATE
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253. NAME	254. STREET ADDRESS	255. CITY & STATE
256. ZIP	257. NAME	258. STREET ADDRESS
259. CITY & STATE	260. ZIP	259. NAME
262. STREET ADDRESS	263. CITY & STATE	264. ZIP
265. NAME	266. STREET ADDRESS	267. CITY & STATE
268. ZIP	269. NAME	2610. STREET ADDRESS
271. CITY & STATE	272. ZIP	273. NAME
274. STREET ADDRESS	275. CITY & STATE	276. ZIP
277. NAME	278. STREET ADDRESS	279. CITY & STATE
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289. NAME	290. STREET ADDRESS	289. CITY & STATE
292. ZIP	293. NAME	294. STREET ADDRESS
295. CITY & STATE	296. ZIP	297. NAME
298. STREET ADDRESS	299. CITY & STATE	298. ZIP
299. NAME	300. STREET ADDRESS	300. CITY & STATE

14. I, the undersigned, being a resident of, and duly qualified to act as, a registered agent of, hereby certify that the above-named corporation submits this statement for the purpose of changing its registered agent, and I, the undersigned, hereby accept the appointment as registered agent of the corporation, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *[Signature]* 8-6-96 (813)-781-5488

NAME AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR