

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

FILED

Sep 05 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000021187 (5)

1. Corporation Name
BERT MISNER, O.D., P.A.



Principal Place of Business
3070 WHISPERING DR.
LARGO FL 34641

Mailing Address
3070 WHISPERING DR.
LARGO FL 34641

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
03/07/1996

3a. Date of Last Report

2. Principal Place of Business
21 445 S. Bobcock St
Suite, Apt. #, etc.

2a. Mailing Address
26 445 S. Bobcock
Suite, Apt. #, etc.

22 City & State
23 Melbourne FL

27 City & State
28 Melbourne FL

24 Zip
32901

25 Country
Brevard

29 Zip
32901

30 Country
Brevard

4. FEI Number
65-0650735

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

MISNER, BERT
3070 WHISPERING DR.
LARGO FL 34641

10. Name and Address of New Registered Agent

81 Name
Misner, Bert

82 Street Address (P.O. Box Number is Not Acceptable)
583 Balcom Terr SE

83

84 City
Melbourne, Palm Bay FL

85 Zip Code
32909

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)

8/30/97

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
DP	MISNER, BERT	3070 WHISPERING DR.	LARGO FL 34641
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<input type="checkbox"/> DELETE			
<input type="checkbox"/> DELETE			
<input type="checkbox"/> DELETE			
<input type="checkbox"/> DELETE			
<input type="checkbox"/> DELETE			
<input type="checkbox"/> DELETE			

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP
President	Misner, Bert	583 Balcom Terr SE	Palm Bay FL 32909
<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
<input type="checkbox"/> Change <input type="checkbox"/> Addition			
<input type="checkbox"/> Change <input type="checkbox"/> Addition			
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14. I do 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
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

Bert Misner 8/30/97 407-725-6516

CR2E034 (4/97)