

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  
Jul 06, 1999 8:00 am  
Secretary of State

07-06-1999 90002 038 \*\*\*150.00

DOCUMENT #

P96000027640

1. Corporation Name

VisionCare 2000, Inc.

Principal Place of Business

Mailing Address

2752 East Colonial Drive  
Suite 100E  
Orlando, Florida 32803

SAME

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

March 25, 1996

4. FEI Number

65-0673651

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

\$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

2a. Mailing Address

21 As above

26 As above

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

William James Dietz  
800 North Highland Avenue  
Orlando, Florida 32803

81 Name

William James Dietz

82 Street Address (P.O. Box Number is Not Acceptable)

25 South Magnolia Avenue

83

84 City

Orlando

FL

85 Zip Code

32801

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 ☐ DELETE  
NAME Director  
STREET ADDRESS Christopher Reed  
CITY-ST-ZIP 2752 East Colonial Drive, Suite 100E  
Orlando, Florida 32803

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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 changes, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)

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581638-90002-38

*Law Offices of*  
**DIETZ & SANDERS, P.A.**

*Post Office Box 974, Orlando, Florida 32802*

*Telephone (407) 648-1430*

*Facsimile (407) 648-9193*

William James Dietz

June 28, 1999

Annual Reports Filing  
Division of Corporations  
Post Office Box 6327  
Tallahassee, Florida 32314

Re: VisionCare 2000, Inc.  
Profit Corporation Annual Report  
File Number: VisionCare 2000, Inc.:WJD:091895

Dear Sir or Madam,

Enclosed please find the Profit Corporation Annual Report for VisionCare 2000, Inc. and a check in the amount of \$150.00. Pursuant to my secretary's conversation with Tom of the Florida Division of Corporations, Annual Reports Department, the late fee will be waived because my client never received the first Annual Report form. Please call if you have any questions. Thank you for your assistance in this matter.

Sincerely,



William James Dietz  
for the Firm

WJD:ks

enclosures