

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

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PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P97000027413 (8)
1. Corporation Name

VISION 21 MANAGEMENT SERVICES, INC.

FILED

98 AUG -3 AM 10:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business

7209 BRYAN DAIRY RD
LARGO FL 34647

Mailing Address

7209 BRYAN DAIRY RD
LARGO FL 34647

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/26/1997

4. FEI Number

59-343655

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

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

33777

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

33777

Country

30

9. Name and Address of Current Registered Agent

SMITH, DARRELL C
101 E KENNEDY BLVD
SUITE 2800
TAMPA FL 33602

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

TITLE ☒ DELETE

NAME GILLETTE, THEODORE N

STREET ADDRESS 7209 BRYAN DAIRY RD

CITY-ST-ZIP LARGO FL 34647

TITLE ☒ DELETE

NAME SANCHEZ, RICHARD L

STREET ADDRESS 7209 BRYAN DAIRY RD

CITY-ST-ZIP LARGO FL 34647

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY-ST-ZIP ☐ DELETE

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY-ST-ZIP ☐ DELETE

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY-ST-ZIP ☐ DELETE

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D/P ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP Largo, FL 33777

2.1 TITLE D/S/VP ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP Largo, FL 33777

3.1 TITLE D/T ☐ Change ☒ Addition

3.2 NAME

3.3 STREET ADDRESS Richard T. Welch

3.4 CITY-ST-ZIP 7209 Bryan Dairy Road

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

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****150.00 ****150.00

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 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 I were 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:

(813)-545-4300

CR2E034 (5/98)

2

SHUMAKER, LOOP & KENDRICK, LLP

ATTORNEYS AT LAW

BARNETT PLAZA - SUITE 2800
101 EAST KENNEDY BOULEVARD
TAMPA, FLORIDA 33602

TOLEDO OFFICE
NORTH COURTHOUSE SQUARE
1000 JACKSON
TOLEDO, OHIO 43624-1573
(419) 241-9000
FAX (419) 241-8894

(813) 228-7600
FAX (813) 228-1660

MAILING ADDRESS
POST OFFICE BOX 172609
TAMPA, FLORIDA 33672-0609

CHARLOTTE OFFICE
128 SOUTH TRYON STREET
SUITE 1800
CHARLOTTE, NORTH CAROLINA 28202
(704) 378-0057
FAX (704) 332-1197

WRITER'S DIRECT DIAL NUMBER:
(813) 227-2263

July 22, 1998

FEDERAL EXPRESS

Florida Secretary of State
Annual Reports Filings
Post Office Box 1500
Tallahassee, FL 32302-1500

Re: Vision Twenty-One Annual Reports

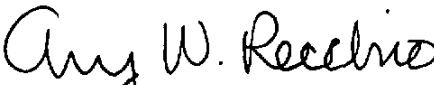
Dear Sir/Madam:

On April 16, 1998, our client's accounting department sent in the annual reports for Vision Twenty-One, Inc.; Vision Twenty-One Physician Practice Management Company; Vision 21 Managed Eye Care of Tampa Bay, Inc.; Vision 21 Management Services, Inc.; Vision 21 of Southern Arizona, Inc.; Vision 21 of Sierra Vista, Inc.; Vision Twenty-One Eye Laser Centers, Inc.; and Optometric Associates of Florida, P.A. Our client received the enclosed Second Notices. After speaking with your offices and determining that the check never cleared the bank, we have determined that the annual reports (together with the checks) were lost in the mail.

Enclosed for filing with your offices are the Annual Reports and 8 checks each in the amount of \$150.00 as the filing fee.

If you have any questions, please do not hesitate to call me.

Sincerely,


Amy W. Recchio
Legal Assistant

AWR/