

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000094913

1. Entity Name

VISION TWENTY-ONE EYE LASER CENTERS, INC.

FILED
May 16, 2001 8:00 am
Secretary of State

05-16-2001 90187 044 ***150.00

Principal Place of Business

Mailing Address

7360 BRYAN DAIRY RD
STE 200
LARGO FL 33777

7360 BRYAN DAIRY RD
STE 200
LARGO FL 33777

2. Principal Place of Business

120 W. FAYETTE ST.

3. Mailing Address

120 W. FAYETTE ST.

Suite, Apt. #, etc.

700

Suite, Apt. #, etc.

700

City & State
BALTIMORE, MD

City & State
BALTIMORE, MD

Zip
21201-3741

Country
USA

Zip
21201-3741

Country
USA



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3478239

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE DP
NAME GILLETTE, THEODORE N
STREET ADDRESS 7360 BRYAN DAIRY RD STE 200
CITY-ST-ZIP LARGO FL 33777 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DP
NAME GORDON, MARK
STREET ADDRESS 120 W. FAYETTE ST. #700
CITY-ST-ZIP BALTIMORE, MD 21201-3741 ☐ Change ☒ Addition

TITLE T
NAME JONES, RICHARD
STREET ADDRESS 120 W. FAYETTE ST. #700
CITY-ST-ZIP BALTIMORE, MD 21201-3741 ☐ Change ☒ Addition

TITLE S
NAME GORDON, ELLEN
STREET ADDRESS 120 W. FAYETTE ST. #700
CITY-ST-ZIP BALTIMORE, MD 21201-3741 ☐ Change ☒ Addition

TITLE D
NAME ALCON, ANDREW
STREET ADDRESS 120 W. FAYETTE ST. #700
CITY-ST-ZIP BALTIMORE, MD 21201-3741 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RICHARD JONES 4/30/01 410-752 0121

Date

Daytime Phone #

CR2E034 (10/00)