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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

| OCUI Corporatio | | N D A | | | | | | | | |
|---|---|--|---|---|--|--|--|------------------------------|--|------------------------------|
| JAMES D. JOHNSON, P.A. Principal Place of Business Mailing Address | | | | | | | | | | |
| 145 BUNNY RUN DRIVE JORTH FT MYERS FL 33917 | | | 3145 BUNNY RUN DRIVE NORTH FT MYERS FL 33917-1525 | | | | | | | |
| | | | | | | | 3. Date Incorporated or Qualift 03/21/1991 | | Date of Last F 1/29/1996 | teport |
| _ ' | lace of Busines | SS | t | iling Address | | | 4. FEI Number 65-0255146 | | | oplied For |
| Suite, Apt | #, etc | | 26 Sui | ite, Apt. #, etc. | | | | | | ot Applicable Additional |
|] | | | 27 | · · · · · · · · · · · · · · · · · · · | | | 5. Certificate of Status Desired | , 🗆 | • | equired |
| City & Stat | te | | | y & State | | | 6. Election Campaign Financi | ng 🗍 | | May Be |
|] Zip | | Country | 28 | | Cou | untry | Trust Fund Contribution 8. This corporation has liability | | | to Fees |
| <u> </u> | 25 | ໆ ່ | 29 | | 30 | | Florida Statutes | Yes | | 1. 195.052 |
| | | nd Address of Cur | rent Registere | d Agent | | | 10. Name and Address of Ne | w Registered | d Agent | |
| | inson, Jame 5 Bunny Rui | | | | | 81 Name | | | | |
| | RTH FT MYER | | | | | 82 Street Ad | ddress (P.O. Box Number is Not Acco | eptable) | | |
| 1401 | 1111 1 MILES | 10 1 L 509 17 | | | | 83 | | | | |
| | | | | | | 84 City | | | . 85 Zip | Code |
| | | | | | | lead Cità | | F | | COO |
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| 11, Pursuant office or | to the provision | ns of Sections 607.0 | 0502 and 607.1 | 508, Florida Stal | tutes, the a | bove-named co | orporation submits this statement for | | | ts registered |
| office or agent 1 a | to the provision registered ager arm familiar with. | ns of Sections 607.0 nt, or both, in the St , and accept the ob | 0502 and 607.1 tate of Florida. Soligations of, Se | 508, Florida Stal Such change wa ection 607.0505, | tutes, the a s authorize Florida Sta | bove-named co d by the corpo tutes. | orporation submits this statement for ration's board of directors. I hereby a | | | ts registered registered |
| II, Pursuant office or agent La SIGNATURE | am familiar w.th, | , and accept the ob | oligations of, Se | ection 607.0505, | Florida Sta | tutes. | | the purpose accept the ap | | ts registered registered |
| agent La IGNATURE | am familiar w.th, | , and accept the ob- | oligations of, Se | ection 607.0505, | Florida Sta | tutes. | orporation submits this statement for ration's board of directors. I hereby a quired when reinstating) ADDITIONS/CHANGES TO | the purpose accept the ap | of changing i ppointment as | |
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Secretary of State