

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 10, 2001 8:00 am
Secretary of State

07-10-2001 90116 022 ***150.00

DOCUMENT # S40529

1. Entity Name
BAY HILL EYE CARE, INC.

(LA)

Principal Place of Business
7051 DOCTOR PHILLIPS BLVD
SUITE 7
ORLANDO FL 32819
US

Mailing Address
7051 DOCTOR PHILLIPS BLVD
SUITE 7
ORLANDO FL 32819
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3060128**

Applied For
 Not Applicable

Zip

Country

Zip

Country

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

NOWELL, JOHN
7051 DR PHILLIPS BLVD
#7
ORLANDO FL

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 \$550.00
After September 12, 2001 Fee will be \$750.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME **D**
 STREET ADDRESS **NOWELL, JOHN L.**
 CITY-ST-ZIP **7917 BAYSIDE VIEW DR**
ORLANDO FL 32819

☒ Delete

TITLE
 NAME **D**
 STREET ADDRESS **Nowell, John L.**
 CITY-ST-ZIP **8066 Monier Way**
ORLANDO, FL. 32837

☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Delete

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:

John L. Nowell
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

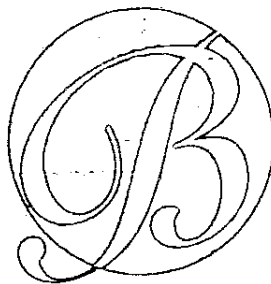
7-5-01

Date

407 351-3232

Daytime Phone #

CR2E034 (5/01)



BAYHILL

EYE CARE & EYEWEAR

DR. JOHN L. NOWELL
Optometric Physician

July 5, 2001

Department of State
2001 Uniform Business Report

RE: Missing report returned March 21, 2001

To Whom It May Concern:

Please be advised that on March 21, 2001, Bay Hill Eye Care & Eyewear returned the 2001 Uniform Business Report.

On July 3, 2001 we received your request to respond for the year 2001. I called your office to let you know that I have already filed this report. AS you can see I have enclosed a copy of my check register from Quick Books Pro. Check number 12913 was made payable to Department of State for the Uniform Business Report.

Although the check has not cleared the bank, it was mailed out in a timely manner as we have always done in the past.

Please waive the additional penalties for the extended date filing. I have enclosed another check for \$150.00. If my other report shows up, please refund the overpayment or advise us on your policy when this occurs.

Thank you for your attention to this matter.

Rebecca Nowell
Practice Administrator

Bay Hill Eye Care & Eyewear

BOUSG979
D# S40529

Register: Bay Hill Eye Care

From 03/20/2001 through 03/22/2001

Sorted by: Date, Type, Number/Ref

Date	Number	Payee	Account	Memo	Payment	C	Deposit
03/20/2001			Credit Card Other	Deposit		X	2,159.00
03/20/2001			Credit Card Other	Deposit		X	613.00
03/20/2001			Credit Card Other	Deposit		X	554.00
03/20/2001			Credit Card Other	Deposit		X	360.00
03/20/2001			Credit Card Other	Deposit		X	302.00
03/20/2001			Credit Card Other	Deposit		X	71.00
03/20/2001			Daily income deposits	Deposit		X	2,074.60
03/20/2001			Daily income deposits	Deposit		X	1,444.95
03/20/2001			Daily income deposits	Deposit		X	996.10
03/20/2001			Daily income deposits	Deposit		X	980.36
03/20/2001			Daily income deposits	Deposit		X	600.00
03/20/2001			Daily income deposits	Deposit		X	234.20
03/21/2001			Credit Card Other	Deposit		X	2,185.00
03/21/2001			Credit Card American ...	Deposit		X	328.20
03/21/2001			Credit Card Other	Deposit		X	177.00
03/21/2001	ach	Amercian Express	-split-		4,720.90	X	
03/21/2001	12896	American Cancer So...	Donation		10.00	X	
03/21/2001	12904	Florida Department ...	Taxes	Penalty on Tax...	10.00	X	
03/21/2001	12905	Florida Power	Utilities		372.77	X	
03/21/2001	12906	Bell South351-3232	-split-		761.35	X	
03/21/2001	12907	Citibank Adv Visa	-split-	additional pay...	4,095.95	X	
03/21/2001	12908	AT & T Wireless	Telephone:Cell Phone		10.98	X	
03/21/2001	12909	Arch Wireless	2000 - Accounts Payable		75.19	X	
03/21/2001	12910	Federal Express	Shipping & Delivery	1987-3444-6 ...	14.70	X	
03/21/2001	12911	Airborne Express	Shipping & Delivery		30.98	X	
03/21/2001	12912	Prompt Attention	Computer Equipt		206.70	X	
03/21/2001	12913	Department of State	6999 - Uncategorized	Filing for 2000	150.00		
03/21/2001	12914	Lippincott Williams ...	Publications		60.37	X	
03/21/2001	12915	Lead Ameriques	Optical Supply	C2585/ Paid in...	2,862.55	X	
03/21/2001	12916	Biocompatibles	Contact Lenses		54.95	X	
03/21/2001	12917	Eclips	Optical Supply		315.75	X	
03/21/2001	12918	OGI Frames, INC	Optical Supply		567.00	X	
03/21/2001	12919	Excel Advantage	Contact Lenses	003640 Account	31.51	X	
03/21/2001	12920	Optogenics	Lab.lenses		1,621.09	X	
03/21/2001	12921	Dymanic Lab	Lab Expenses	42347 Invoice	74.99	X	
03/21/2001	12922	Systematic Solutions	-split-		70.00	X	
03/21/2001	12923	Airborne Express	-split-		35.35	X	
03/21/2001	12924	Latham and Phillips ...	Medical	account NO 64...	1,236.99	X	
03/21/2001	12925	MCI long distance	Telephone:Office Phone		47.50	X	