

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S53840

Entity Name: RCC VISION, INC.

FILED  
Jan 08, 2008  
Secretary of State

## Current Principal Place of Business:

6730 SE SOUTH MARINA WAY  
STUART, FL 34996 US

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 33209  
PALM BEACH GARDENS, FL 33420 US

## New Mailing Address:

FEI Number: 65-0263639

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PEARLMAN NEASE, MARIAN  
2650 N MILITARY TRAIL  
SUITE 240  
BOCA RATON, FL 33431 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: ROTHPLETZ, ROLAND  
Address: PO BOX 33209 N/A  
City-St-Zip: PALM BEACH GARDENS, FL 33420 US

Title: S ( ) Delete  
Name: ROTHPLETZ, CATHERINE  
Address: POST OFFICE BOX 33209 N/A  
City-St-Zip: PALM BEACH GARDENS, FL 33420 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROTHPLETZ, ROLAND

P

01/08/2008

Electronic Signature of Signing Officer or Director

Date