

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K39350

FILED  
Feb 11, 2010  
Secretary of State

**Entity Name:** OCUCARE SYSTEMS, INC.

**Current Principal Place of Business:**

9042 W ST RD 84  
FT LAUDERDALE, FL 33324 US

**New Principal Place of Business:**

7711 CARONDELET AVE  
ST LOUIS, MO 63105 US

**Current Mailing Address:**

7711 CARONDET AVE.  
SUITE 800  
SAINT LOUIS, MO 63105 US

**New Mailing Address:**

**FEI Number:** 65-0094759      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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:** PRES  
**Name:** LAVELY, DAVID  
**Address:** 112 ZEBULON COURT  
**City-St-Zip:** ROCKY MOUNT, NC 27804 US

**Title:** V  
**Name:** DAVIS, JOHN R  
**Address:** 9042 W ST RD 84  
**City-St-Zip:** FT LAUDERDALE, FL 33324 US

**Title:** VP  
**Name:** HARROLD, JASON  
**Address:** 112 ZEBULON COURT  
**City-St-Zip:** ROCKY MOUNT, NC 27804 US

**Title:** SEC  
**Name:** WILLIAMSON, KEITH  
**Address:** 7711 CARONDELET AVE  
**City-St-Zip:** ST LOUIS, MO 63105

I hereby 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 all other like empowered.

SIGNATURE: TRICIA DINKELMAN

DIR

02/11/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date