

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

· Office of the Secretary of State

Matthew A. Brown, Secretary of State

Corporations Division 100 North Main Street Providence, RI 02903-1335 401.222.3040

2005

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR _

Filling Period: January 1 - March 1 • Filling Fee: \$50.00 (FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 14962	2. Name of Corporation Vision Associate	es Inc.		 <u>-</u> .	
3. Street 1 deress Princetten Buyings of	Ou Stre	et	(a) NOD resochet	State RI	02895
4. Business Phone No. 40 9-2	755	5. State of Incorporation RHODE ISLAND			6. SIC Code 9290
7. Brief Description of the Character of TO ENGAGE IN THE PRI	CTICE OF OPTOME	ode Island			
8. NAMES AND ADDRESSES Preside vi Name	OF THE OFFICERS:	("X" BOX FOR ATTAC	CHMENT)	ES BEFORE USING AT	TACHMENTS
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sirci 1948 SOCI	al Stre	ret	Street Address SUCIO	il Stree	7
"Wooneoclut	State RI	²⁴⁰ 02895	Woonsald	Sinie RI	202895
9. NAMES AND ADDRESSES Director Name	OF THE DIRECTORS	S: ("X" BOX FOR ATT,	ACHMENT) FILL IN SPA	ACES BEFORE USING	ATTACHMENTS
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Cuy	State	Zιp	City	State	Zip
Director Name	L	J	Director Nume		l
Sinei Address			Street Address		
City	State	Zıp	City	State	Zip ·
	· '		11. SHARES ISSUED ("X"	 BOX FOR ATTACHME	 N70 □ .
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AUTHORIZED SHARES Number of Shares 2,000 COMM NO PAR VALU	Class/Series E	Par Value	Number of Shares	6	Par Value
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AUTHORIZED SHARES Number of Shares 2,000 COMM NO PAR VALU	Class/Series E	Par Value	Number of Shares Esident, Secretary, Assistant Secretary, Under penalty of porjury,	cretary, Treasurer, Reco	eiver or Trustee
AUTHORIZED SHARES Number of Shares 2,000 COMM NO PAR VALU This report must be si	Class/Series E gned in ink by eithe	Par Value	Number of Shares Esident, Secretary, Assistant Secretary, Under penalty of porjury,	I declare and affirm that I	Par Value
AUTHORIZED SHARES Number of Shares 2,000 COMM NO PAR VALU This report must be si	Class/Series E gned in ink by eithe	Par Value	Number of Shares Esident, Secretary, Assistant Secretary, Under penalty of porjury, including any accompany	I declare and affirm that I	Par Value Eiver or Trustee have examined this report,
AUTHORIZED SHARES Number of Shares 2,000 COMM NO PAR VALU This report must be si	Class/Series E gned in ink by eithe	Par Value	Under penalty of porjury, including any accompany	I declare and affirm that I ing schedules and stateme	eiver or Trustee have examined this report, ints, and that all statements
AUTHORIZED SHARES Number of Shares 2,000 COMM NO PAR VALU This report must be si File Date Check No. 317	Class/Series E gned in ink by eithe 8-05	Par Value	Under penalty of perjury, including any accompany application of Officer	I declare and affirm that I ing schedules and stateme	eiver or Trustee have examined this report, ints, and that all statements



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State Matthew A. Brown, Secretary of State

Corporations Division 100 North Main Street Providence, RI 02903-1335 401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR _

2004

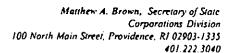
(FORM MUST HE TYPED OR PRIN	TED IN BLACK)	•			
1. Corporate ID No	2. Name of Corporation				
14962	Vision Associate	s Inc.			
3 Street Address Principal Business Q	IAL S	<u> </u>	Wooh.	State RI	02895
461-769-2760 RHODE ISLAND 9290					
7. Brief Description of the Character of TO ENGAGE IN THE PRA	of Business Conducted in R ACTICE OF OPTOMET	hode Island RY			
8. NAMES AND ADDRESSES President Name	OF THE OFFICERS:	("X" BOX FOR ATTA	CHMENT) FILL IN SPACE	CES BEFORE USING AT	TACHMENTS
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Street Address	Schoo	L.Rd.	Street Address 5 FRANCLI	~ Wn/	-
smith field	State	102917	5 FRANKLI 17-Smillfices	State PC Z	D2896
Secretary Name	****		Treasurer Name	J	
Street Address			Street Address	-	 .
City	State	Zip	City	State	Zip
9. NAMES AND ADDRESSES	OF THE DIRECTOR	S: ("X" BOX FOR ATT		ACES BEFORE USING	ATTACHMENTS
Diemonia Sechet	1111		Director TREASUA	in	
Dena CI	tall		Eric J 1	tall.	
Street Address	•		: Street Address		
18 Oakhur	st Pric	<u>بو</u>	12 Synsen	+ ALP	
City City	St Pric	Zip	12 Sunsen	+ ALP	Zip
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City 65-ce OUPILL Director Name	} 	Zip	City Center dale Director Name	siaie RI	1 '
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City City Director Name Street Address City 10. SHARES AUTHORIZED AUTHORIZED SHARES Number of Shares	State State State Class/Series	Zip Zip Zip	City Center date Director Name Street Address City 11. SHARES ISSUED ("X" ISSUED SHARES Number of Shares	State BOX FOR ATTACHME Class/Scries	Zip NT) Par Value
City Director Name Street Address City 10. SHARES AUTHORIZED AUTHORIZED SHARES Number of Shares 2,000 COMM NO PAR VALU	State State ("X" BOX FOR ATT) Class/Series	Zip O28 28 Zip CHMENT)	City Center date Director Name Street Address City 11. SHARES ISSUED ("X" ISSUED SHARES Number of Shares	State BOX FOR ATTACHME Class/Senes	Zip NT) Par Value 10, nc

File Dale 219 04

Check No. 1902

By: Secretary of State Use Only

	f perjury, I declare and affirm that companying schedules and states	
contained herein	a period and correct.	
1/2/		1-10-0
Signature of Office	er	Date
C	JOSEPH L. ROWEY,	O.D.
Print or Type Na	## 01 WOONSOCKET, RI (12895
Title of Officer		Form 630 Rev. 12/03



Ziρ

02895

State

R.I.



2. Name of Corporation
Vision Associates Inc.

(FORM MUST BE TYPED IN BLACK)

3. Street Address Principal Business Office

148 Social Street

1. Corporate ID No. 14962

4. Business Phone No.

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003 Filing Period: January 1 - March 1 • Filing Fee: \$50.00

4. Business Phone No.		5. State of Incorporation	1	··· - · - · · · · · · · · · · · · · · ·	6. SIC Code
401-769-2755		RHODE ISLAND	1		9290
7. Brief Description of the Ch To engage in the p			er lawful business.		, <u> </u>
8. NAMES AND ADDRI	ESSES OF THE OFF	ICERS ("X" BOX FOR AT	TACHMENT) FILL IN SP	ACES BEFORE USING A	TTACHMENTS
Ronald J. Hall		•	Joseph L. Rowey	,	•
Street Address			Street Address		
148 Social Stree	. +	•	.148 Social Str		
	· · · · · · · · · · · · · · · · · · ·				
City	State	Zip	City	State	Zip
Woonsocket ecrelary Name	(R.I.	02895	Woonsocket	R.I.	j02895
•	l		Treasurer Name Eric J. Hall		
Dena Hall Cassid			,		·
Street Address			Street Address		
148 Social Stree		·	.148 Social Stre	et	
Ciry	State	Zip	Cin	State	Zip
Woonsocket	R.I.	02895	. Woonsocket	R.I.	02895
9. NAMES AND ADDRI Director Name	ESSES OF THE DIR	ECTORS ("X" BOX FOR A	ITTACHMENT) FILL IN Director Name	SPACES BEFORE USING	ATTACHMENTS
Ronald J. Hall			Joseph L. Rowey	/	
Street Address	· · · · · · · · · · · · · · · · · ·		Street Address		
148 Social Stree	et.		'148 Social Stre	et	
Cin	State	Zip	·Ciny	State	Zip
Woonsocket	R.I.	02895	Woonsocket	R.I.	: 02895
Director Name	J."."				
Dena Hall Cassid	lv.	•	·Director Name 'Eric J. Hall		
Sireei Address		<u> </u>	_ `		· · · · · · · · · · · · · · · · · · ·
148 Social Stree		•	Sirect Address 148 Social Stre	, .a.t	
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Woonsocket	R.I.	02895	'Woonsocket	R.I.	02895
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This report must be sig	ned in ink by eithe	r the President, Vice P	<u> </u>	stant Secretary, Treas	urer, Receiver or Trustee
		•			
1 4	9 6 2		Under penalty of pe	rjury, I declare and affirm	that I have examined
			this report, including	g any accompanying sche	dules and statements,
Cil	ED		and that all statemen	nts contained herein are tr	ue and correct.
	.ED		1/2	1 1/2	_) 2 2
File Date	- aaaa <u>rn</u>	Till ka in an i	Vom	· Com	- 2-10-0
Check No. FEB 2	8 2003 EU.	FEB 28 2 39 PH	Signature of Difficer Joseph L. F	Rowey	Date
By Ch	L 21 2995/10	akonyaceaoo -	Print or Type Name of		
$B_{Y_{i}}$		S 30 188: 50: 220	Vice Presid	ent	
FOR SECRETARY OF STA	TE USE ONLY	0 3 4 13 6 3 3 3 3 5	Title of Officer	····	F 630 1270
	- 7:	BECEINED	int of Officer		Form 630 12/0

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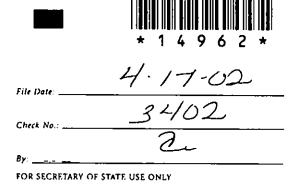
Woonsocket

Edward S. Inman, III, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

PROFIT CORP (Filing Period: January			PORT FOR THE	YEAR	2002	STOP PLIASE READ ENSTRUCTIONS
(FORM MUST BE TYPED IN BLAC	CK)					
1. Corporate ID No.	2. Name of Corporation					. —
14962	Vision Associ	ates Inc.				
3. Street Address Principal Business (Office		City	State		Zip
148 Social St	reet		Woonsocket		RI	02895
4. Business Phone No.		5. State of Incorporation			•	6. SIC Code
401-769-2755		RHODE ISLAND				9290
7. Brief Description of the Character	•					
To engage in	the practic	e of optometr	ry and any other	lawful b	usines	ss.
8. NAMES AND ADDRESS President Name		ERS ("X" BOX FOR ATTAC	HMENT) FILL IN SPACES B Vice President Name	EFORE USING A	ТТАСНМЕ	INTS
Ronald J. Hal	1		Joseph L. Row	еy		
Street Address 148 Social St	reet	·	Street Address 148 Social St	reet		
City	State	Zip	City	State		Zip
Woonsocket	RI	02895	Woonsocket		RI	02895
Secretary Name		** *** * = *	: Treasuter Name			• •
Dena Hall Ca Street Address	ssidy		Eric J. Hall Street Address			
148 Social St	reet		148 Social St	reet		
Woonsocket	State RI	^{zip} 02895	_{City} Woonsocket	State	RI	02895
9. NAMES AND ADDRESS Director Name	SES OF THE DIREC	TORS ("X" BOX FOR ATT	ACHMENT) FILL IN SPACES Director Name	BEFORE USING	ATTACHN	MENTS
Ronald J. Hal	.1		Joseph L. Row	ey		
Street Address			Street Address			
148 Social St	reet		148 Social St	reet		
Woonsocket .	State RI	zip 02895	_{City} Woonsocket	State	RI .	^{Zip} 02895
Director Name	To provide the second	***	Director Name			
Dena Hall Ca Succet Address	ssidy		Eric J. H Street Address	all		
148 Social S	treet		148 Social	Street		
City	State	Zip	City	State		Zip
Woonsocket	RI	02895	Woonsocket	RI		02895
10. SHARES AUTHORIZED AUTHORIZED SHARES	O ("X" BOX FOR ATTACI		11. SHARES ISSUED (*X		IMENT)	
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series		Par Value
2,000 COMM NO PAR VAL						
			200	common	. 1	no par value

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

⊲



Under penalty of perjuty, I declare and affirm that I have examined this seport, including any accompanying schedules and statements, and all statements contained hereing true and correct. Signature of Officer Date Joseph L. Rowey Print or Type Name of Officer Vice-President and Secretary Title of Officer

Ferm 630 12/01

Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1 Corporate ID No.

2. Name of Corporation

14962

Vision Associates Inc.

3. Street Address Principal Business Office City State Zip 148 SOCIAL STREET WOONSOCKET RI02895 4. Business Phone No. 5. State of Incorporation RHODE ISLAND (401) 769-2755

7. Brief Description of the Character of Business Conducted in Rhode Island

To engage in the practice of optometry and any other lawful business.

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS President Name Vice President Name RONALD J. HALL JOSEPH L. ROWEY

Street Address

Street Address 148 SOCIAL STREET 148 SOCIAL STREET

City State City State WOONSOCKET 02895 RIWOONSOCKET RI 02895 Secretary Name Treasurer Name

JOSEPH L. ROWEY JOSEPH L. ROWEY Street Address Street Address

148 SOCIAL STREET 148 SOCIAL STREET

City State Zip City State 2.10 WOONSOCKET RI 02895 WOONSOCKET RI 02895

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name Director Name

RONALD J. HALL JOSEPH L. ROWEY

Street Address Street Address 148 SOCIAL STREET 148 SOCIAL STREET

City City State 210 State 210 WOONSOCKET 02895 RT WOONSOCKET RI02895 Director Name Director Name

NONE NONE Street Address Street Address

City State Zip City State Zip

10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) AUTHORIZED SHARES ISSUED SHARES

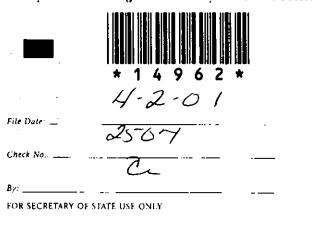
Number of Shares Number of Shares Class/Series Par Value Class/Series Par Value

2,000 SHS COM NO PAR VAL 200 amman no par value

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

VICE-PRESIDENT

Title of Officer



Underspenalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and re true and correct. ومرتوا ll statements containgd hergin ØSEPH L. ROWLY Print or Type Name of Officer

Form 630 12/00



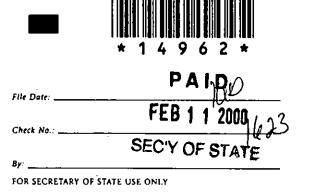
James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000

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INSERTED

Filing Period: Januar	y 1-March 1 •	Filing Fee: \$50.00			INTRU HON
(FORM MUST BE TYPED IN BL.	ACK)				
1. Corporate ID No. 14962	2. Name of Corpor Vision As	ation B sociates Inc.			•
3. Street Address Principal Business	Office		City	State	Zip
148 SOCIAL St. 4. Business Phone No. (401) 769-27 7. Brief Description of the Characte	55	5. State of Incorporation RHODE ISLAN In Rhode Island		RI	02895 * 9290
To engage in	the pract	ice of optomet	ry and any other CHMENT) FILL IN SPACES (Vice President Name		
RONALD J. HA	LL		JOSEPH L. ROV	VEY	
148 SOCIAL S	TREET State	Zip · · ·	148 SOCIAL ST	FREET State	··· · · · · · · · · · · · · · · · · ·
WOONSOCKET. Secretary Name	RI .	02895	WOONSOCKET Treasurer Name	RI	02895
JOSEPH L. RO	WEY		JOSEPH L. ROY Street Address	WEY	
148 SOCIAL S	TREET		148 SOCIAL ST	TR EET	
City	State	Zip	City	State	Zip
WOONSOCKET 9. NAMES AND ADDRES Director Name	RI SSES OF THE DIF	02895 SECTORS (*X* BOX FOR AT	WOONSOCKET TACHMENT) FILL IN SPACE Director Name	RI ES BEFORE USING A	02895 ATTACHMENTS
RONALD J. HA	LL		JOSEPH L. ROV	WEY	
148 SOCIAL S	TREET		148 SOCIAL ST	TREET	
City	State	Zip	City	State	Zip
WOONSOCKET Director Name	RI	02895	WOONSOCKET Director Name	RI	○ 302895□ 36 次
Street Address			Street Address		200
City	State	Zip	City	State	22 Zin m
10. SHARES AUTHORIZE AUTHORIZED SHARES	ED ("X" BOX FOR AT	TACHMENT)	11. SHARES ISSUED (* ISSUED STARES	"X" BOX FOR ATTACHM	TATE
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
2,000 SHS COM NO	PAR VAL			•	· _
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			•	•	

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



VICE PRESIDENT

Title of Officer



James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1999 Filing Period: January 1-March 1 • Filing Fee: \$50.00



(FORM MUST BE TYPED IN BLACK) 1. Corporate ID No. 2. Name of Corporation Vision Associates Inc. 14962 3. Street Address Principal Business Office 148 SOCIAL STREET WOONSOCKET R.I. 02895 4. Business Phone No. 6. SIC Code 5. State of Incorporation (401) 769-2755RHODE ISLAND 9290 7. Brief Description of the Character of Business Conducted in Rhode Island To engage in the practice of optometry and any other lawful business. 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) | FILL IN SPACES BEFORE USING ATTACHMENTS JOSEPH L. ROWEY RONALD J. HALL Street Address Street Address 148 SOCIAL STREET 148_SOCIAL_STREET_ State R.I. City WOONSOCKET | State R. I. ^{21p} 02895 CitWOONSOCKET JOSEPH L. ROWEY JOSEPH L. ROWEY Street Address 148 SOCIAL STREET 148 SOCIAL STREET . . - - - -State WOONSOCKET WOONSOCKET R.I. 02895 02895 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) | FILL IN SPACES BEFORE USING ATTACHMENTS " : Director Name RONALD J. HALL JOSEPH L. ROWEY Street Address Street Address 148 SOCIAL STREET 148 SOCIAL STREET - - - - ----T State Zip WOONSOCKET 02895 WOONSOCKET 02895 R.I. Director Name Director Name Street Address Street Address Zip Zio 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) () . 0 . Νu Th

			ISSUED SHARES		
mber of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
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is report must be	signed in ink by eit	- her the President, V	/ice President, Secretary, Ass	istant Secretary, Trea	asurer, Receiver or Trustee
	* 1 4 9 6	 	Under penalty of p	eriury. I declare and aff	irm that I have examined
	υ OΩ	_	this report, includi		chedules and statements, and
File Date: \(\frac{\dagger}{2} - \frac{\dagger}{2} - 2	<u>6-97 </u>		Signature of Officer	Muy	-2-27 99 Date



James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-277-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1998

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM	MUST	BE	TYPED	IN	BLACK)

1. Corporate ID No.

2. Name of Corporation

14962 3. Street Address Princi	Vision Assoc	ates Inc.	City		State	Zip
148 Socia	l Street		Woonsocket		RI	02895
4. Business Phone No.		5. State of Incorporation				6. SIC Code
401-769-2		RHODE ISLAND) professional	domiso	od of optomoty	9290
4	he Character of Business Conducted in R	_	=		. <u>.</u> .	
	all lawful business desirable or applica ADDRESSES OF THE OFFICE		_{IMFNT)} purposes	nerein	eld of optome to the attain set forth A a professiona	ov law.business
Carrie d d donne	Ronald J. Hall		(n	Joseph	L. Rowey	
Street Address	170 Mann School Roa	d	Street Address	5 Frank	:lin Way	
City	State	Zip	City	J Plain	State	Zip
Smithfield	RI	02828	No. Smithf	ield	RI	02896
Secretary Name			Treasurer Name			
Street Address	Joseph L. Rowey		Street Address	Ronald	J. Hall	
City	5 Franklin Way	7in	Cin.	170 Mar	n School Road	7.0
		Zip	City	,		Zip
No. Smithfi 9. NAMES AND Director Name	eld RI ADDRESSES OF THE DIREC	02896 TORS ("x" box for atta	Smithfield CHMENT) Director Name	ı	RI	02828
Street Address			Street Address			
City	State	Zip	City		State	Zip
Director Name			Director Name			
Street Address			Street Address			
City	State	Zıp	City		State	Zıp
10. SHARES AUT	THORIZED (*X* BOX FOR ATTAC	HMENT)	11. SHARES ISS	SUED ("X" BO	OX FOR ATTACHMENT)	
Number of Shares	Class/Series	Par Value	Number of Shares		Class/Series	Par Value
2,000 SHS C	OM NO PAR VAL		66 2/3 plus	66 2/3	Common	No Par Value
This report mus	t be signed in ink by eithe	the President, Vice I	President, Secretar	ry, Assistan	t Secretary, Treasur	er, Receiver or Trustee

File Date:	* 1 4 9 6 2 *
Check No.:	4325
By:FOR SECRETARY O	OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer

Ronald J. Hall
Print or Type Name of Officer

President
Title of Officer

C. 21 12 /0/

Date 1



James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-277-3040

PROFIT CORPORATION ANNUAL REPORT 1997

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.

2. Name of Corporation

14962

Vision Associates Inc.

3. Street Address Principal Business Office

Cliv

State

148 Social Street

Woonsocket

RI

02895

4. Business Phone No. 401-769-2755 S. State of Incorporation **RHODE ISLAND** 6. SIC Code 9290

7. Brief Description of the Character of Business Conducted in Rhode Island 7. Bilef Description of the Character of Business Conducted in Rhode Island, rendering professional services of optometrists. Engaging in any and all lawful business including services related to the field of optometry whatsoever necessary desirable or applicable in connection with or indicental to the attainment of the

8. NAMES , President Name	AND ADDRESSES OF THE O	FFICERS ("X" BOX FOR ATT	Vice President Name	herein set forth to a professiona	l services Corp.
Street Address	RONALD J. HALL		JO Street Address	SEPH L. ROWEY	
•	170 Mann School Ros	ıd	. 5	Franklin Way	
Clty	State	Zip	City	State	Zip
Smithfie	eld RI	02896	No. Smithfiel	d RI	02896

JOSEPH L. ROWEY

Street Address

RONALD J. HALL

02896

02917

Street Address

5 Franklin Way

State

State

170 Mann School Road State

RI

No. Smtihfield RI 02896 Smithfield 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT)

Director Name

Director Name

City

Secretary Name

Street Address

City

Street Address

Treasurer Name

City

State

Zip

Zip

Director Name

Street Address

Street Address

Director Name

City

State

Zlo

City

City

State

. Zip

10. SHARES AUTHORIZED AND ISSUED ("X" BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

ISSUED SHARES

Number of Shares

Class/Series

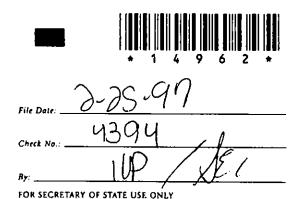
Par Value

2.000 SHS COM NO PAR VAL

66 2/3 plus 66 2/3 Common

No Par Value

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and spatements contained herein are true and correct.

nature of Officer

Ronald J. Hal Print or Type Name of Officer

President

Title of Officer

PROFIT CORPORATION ANNUAL REPORT

1996



State of Rhode Island and Providence Plantations James R. Langevin, Secretary of State Corporations Division

100 North Main Street Providence, Rhode Island 02903-1335 • (401) 277-3040

Filing Period: January 1-March 1

Filing Fee: \$50.00

		TYPE OR PRINT IN BLACE	CINK.		
1. CORPORATE ID NO. 2. NAME OF CORP	ORATION				
14962	ísion Associate	s Inc. The	ngga a di€n disa was Afri	• •	
	is at the	CITY VALVED	Mark Stark		ZIP COOE
148 Social Street		l l	oonsocket	RI	02895
4. BUSINESS PHONE NO.	5. STATE OF INCORPOR				6. SIC CODE
401-769-2755	RHO	DE ISLAND			9290
	IN RHODE ISLAND Dondon	ine outfact	1	-6	
7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS COMDUCTED any and all lawful busines	s including se	ing professio rvices relate	nai services d to the fiel	or optometri d of optomet	rv whatsoever neces
desirable or applicable in connec	tion with or incid	iental to the at:	ainment of the p	urposes herein	set forth. Any lawful
business not contrary to a 8.	HAMES AND	A D D R E S'S E S	OF THE OFFI	CERS professi	onal services corporat
RONALD J. HALL		VILE PRESIDE		1 DOLLEY	
STREET ADDRESS		STREET ADOR		L. ROWEY	
170 Mann School F	load	1	5 Frank	lin Wav	
CITY STATE	ZIP CODE	άτγ	3 11411	STATE	ZP CODE
	RI O	2917 N	o. Smithfield	RI	02896
SECRETARY NAME	· · · · · · · · · · · · · · · · · · ·	TREASURER N	AME		
JOSEPH L. ROWEY			RONALD J	. HALL	
STREET ADDRESS		STREET ADDR			
5 Franklin Way	₹ZIP COD€	aiy	1/U Mann	School Road	ZIP CODE
No. Smithfield		896	Smithfield	RI	02917
	HAMES AND	<u></u>			02917
DIRECTOR HAME		DIRECTOR NA			
STREET ADDRESS		STREET ADOR	ESS		
CTY STATE	The coor				
STATE	ZP COOE	СПУ		STATE	ZTP C000€
DIRECTOR NAME		DIRECTOR NA	ME		
		1	·· ·		
STREET ADDRESS		STREET ADDR	ESS		
OTY STATE	ZIP C00%	ατν		STATE	ZP COOE
, 1.	D. SHARES AU	THORIZED A	ID ISSUED 4	•	
AUTHORIZED SI				ISSUED SHARES	T
MINBER OF SHARES CLASS / SERI	ES PAR VAL	UR MUM	BEFI OF SHARES	CLASS / SERIES	PARVALUE
2,000 SHS COM NO PAR	R VAL	66 2/	3 plus 66 2/3	Common	No Par Value
		ł	1	-	
L	 	<u></u>	<u>_</u>		<u> </u>
	This report must	be SIGNED IN IN	IK by either the	_	
President, Vice I	President, Secretary			ceiver or Trustee	
<u> </u>	,		Hook Freeh		iffing that know examined this
			report, including any	accompanying so	fules and statements and the
· · · · · · · · · · · · · · · · · · ·	· •		all statements contain	ed nerein are true?	ma correct.
File Date: 5/7/96 Check No: 3545 By: CCM	1		1/1/57/1	alt 1	THEEK SA-
File Date: 6./.// 46	1		Signature of Officer		
Check No: 3545			RONALD J. HA	LL U	
			Print or Type Name of	f Officer	 ···
By: . Com	\mathscr{L}		President		5/2/01
For Secretary of State Use Only	1	-	Title of Officer		Date
- 0	DETACH	BOTTOM BEFOR			FORM 31 12/05

State of Rhode Island and Providence Plantations Office of The Secretary of State 100 North Main Street Providence, Rhode Island 02903-1335 401-277-3040

ANNUAL REPORT

Please Type or Print File Annually – Jan. 1 - March 1

Filing Fee \$50.00 Make Checks Payable to: Secretary of State

ALL ENTRIES MUST BE COMPLETED IN FULL OR THE FORM WILL BE RETURNED.

Name of Corporation: Business entity organized under the laws of the State of: Rhode_Island For foreign entity, address and telephone number of principal office:	Corporate ID:	Annu	al Report for t	the years			
Business entity upganized under the laws of the State of Rhode Island For foreign entity, address and telephone number of principal office:	Vision Associates	inc.	,				
Business Entity is check one): Business Entity is Check one): Substitute Business Entity is Check one): Substitute Business Entity is Check one): National Service Corputation (See RIGI. Chapter 7-5.1) National Service of Optometry Services of Optomet	Name of Corporation:				<u> </u>		
IX Professional Service Corporation (See RIGL Chapter 7-5.1)	Business entity organized under the laws of the State of: Rhode Isl	<u>land</u> B	usiness Entity				
Brief statement of the character of business conducted in Rhode Island. Rendering professional services of optometrists. Deagti in any and all lawful business including services related in any and all lawful business including services related in any and all lawful business including services related in any and all lawful business including services related to the field of optometry that seever necessary, desirable or applicable in connection with or incidental to the attainment of the purposes berein set forth. Any lawful business for the connection with or incidental to the attainment of the purposes berein set forth. Any lawful business for the connection with or incidental to the attainment of the purposes berein set forth. Any lawful business for the connection with or incidental to the attainment of the purposes berein set forth. Any lawful business for the connection with or incidental to the attainment of the purposes berein set forth. Any lawful business for the connection with or incidental to the attainment of the purposes berein set forth. Any lawful business for applicable in connection with or incidental to the attainment of the purposes berein set forth. Any lawful business for applicable in connection with or incidental to the attainment of the purposes berein set forth. Any lawful business for applicable in connection with or incidental to the attainment of the purposes berein set forth. Any lawful business for applicable in connection with or incidental to the attainment of the purposes berein set forth. Any lawful business for applicable in connection with or incidental to the attainment of the purposes berein set forth. Any lawful business for applicable in connection with or incidental to the attainment of the purposes berein set forth. Any lawful business for applicable in connection with or incidental to the attainment of the purposes berein set forth. Any lawful business for applicable in connection with or incidental to the attainment of the purposes berein set forth. Any lawful busine	For foreign entity, address and telephone number of principal office:	1	Business Corporation (See RIGL Chapter 7-1.1)				
Phone: ()			K] Professiona	al Service Corporation (See RIGL Ch	apter 7-5.1)		
Phone: ()		= 4m					
Address and telephone of the principal office of business entity in Rhode Island (Provide street address. Not P.O. Box): 148 Social Street Woonsocket, R. I. 02895 Phone (401) 769-2755 THE NAMES OF THE OFFICERS ARE: TOTATAL 202015 THE NAMES OF THE OFFICERS ARE: TOTATAL 202015 TRESIDENT THE NAMES OF THE OFFICERS ARE: TOTATAL 202015 TRESIDENT THE NAMES OF THE OFFICERS ARE: TOTATAL 202015 TRESIDENT TOTATAL 202015	Discount (
Island (Provide street address - Not POL Box) 148 Social Street 148 Social Stree							
148 Social Street Woonsocket, R. I. 02895 Attinument of the purposes herein set forth. Any lawful business not cuntrary to a professional service corporation. THE NAMES OF THE OFFICERS ARE: ZIPCODE							
AND STREET ADDRESS TO CONTRACT TO THE NAMES OF THE DIFFECTION AND INVESTIGATION AND							
Phone: (401) 769-2755 THE NAMES OF THE OFFICERS ARE: RESIDENT RESIDENT THE NAMES OF THE OFFICERS ARE: STREET ADDRESS RONALD J. HALL 170 Mann School Road Smithfield, Rhode Island 02917 STREET ADDRESS TOTYSTATE JOSEPH L. ROWEY 5 Franklin Way North Smithfield, Rhode Island 02896 STREET ADDRESS TOTYSTATE THE NAMES OF THE DIRECTORS ARE: STREET ADDRESS THE NAMES OF THE DIRECTORS ARE: THE NAMES OF THE DIRECTORS ARE: STREET ADDRESS THE NAMES OF THE DIRECTORS ARE: THE NAMES OF TH	Woonsocket, R. I. 02895						
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THE NAMES OF THE OFFICERS ARE: STREET ADDRESS RONALD J. HALL 170 Mann School Road Smithfield, Rhode Island 02917 JOSEPH L. ROWEY 5 Franklin Way North Smithfield, Rhode Island 02896 BECERTARY STREET ADDRESS CITYASTATE 2PCODE JOSEPH L. ROWEY 5 Franklin Way North Smithfield, Rhode Island 02896 REASIBLE STREET ADDRESS CITYASTATE 2PCODE RONALD J. HALL 170 Mann School Road Smithfield, Rhode Island 02896 RONALD J. HALL 170 Mann School Road Smithfield, Rhode Island 02917 THE NAMES OF THE DIRECTORS ARE: STREET ADDRESS CITYASTATE 2PCODE NAME STREET ADDRESS CITYASTATE 2PCODE NUMBER OF SHARES AUTHORIZED (Rider may be attached) NUMBER OF SHARES ISSUED AND OUTSTANDING (Rider may be attached) Number of Shares Class / Series 2,000 Common 66 2/3 plus 66 2/3 Common Without par value Date February 10 19 95 By RONALD J. HALL PRINT OR THE MAME OF ORDER OF PROCESS: DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:	Phone: (401) 769-2755						
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STREET ADDRESS STREET ADDRESS CITY/STATE CITY/STA							
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STREET ADDRESS CITY/STATE ZEPCODE JOSEPH L. ROWEY 5 Franklin Way North Smithfield, Rhode Island O2896 RONALD J. HALL 170 Mann School Road Smithfield, Rhode Island O2917 THE NAMES OF THE DIRECTORS ARE: STREET ADDRESS CITY/STATE ZEPCODE NAME STREET ADDRESS CITY/STATE ZEPCODE NUMBER OF SHARES AUTHORIZED (Rider may be attached) NUMBER OF SHARES ISSUED AND OUTSTANDING (Rider may be attached) Number of Shares Class / Series 2,000 Common 66 2/3 plus 66 2/3 Common Without par value Date February /0 19 95 By: SMALL J. HALL PRINT OR TYPE NAME OF PRES ISSUED DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:				th Smithfield Rhode Is			
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NAME STREET ADDRESS CITY/STATE NAME STREET ADDRESS CITY/STATE NUMBER OF SHARES AUTHORIZED (Rider may be attached) NUMBER OF SHARES ISSUED AND OUTSTANDING (Rider may be attached) Number of Shares Class / Series PRONALD J. HALL PRINT OR TYPE NAME OF OFFICER SIGNING THE OF OFFICER SIGNING President DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:	RONALD J. HALL 170 Mann S	School Road	d	Smithfield, Rhode Isla	and 02917		
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NUMBER OF SHARES AUTHORIZED (Rider may be attached) Number of Shares Class / Series Personant Without par value Date February /0 19 95 By: RONALD J. HALL FRINT OR TYPE NAME OF OHICER SIGNING President DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:	NAME	STREET ADDRESS		CITY/STATE.	ZIP CODE		
NUMBER OF SHARES AUTHORIZED (Rider may be attached) Number of Shares Class / Series Personant Without par value Date February /0 19 95 By: RONALD J. HALL FRINT OR TYPE NAME OF OHICER SIGNING President DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:	NAME	CTREET ALANDES					
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Number of Shares Class / Series Number of Shares Class / Series Print Of 2/3 plus 66 2/3 Common Without par value Date February /0 19 95 RONALD J. HALL PRINT OF TYPE NAME OF OFFICER SIGNING President DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:	AND ADDRESS OF THE AD						
2,000 Common Without par value Date February /0 19 95 Form 3' 1/95 DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:	NUMBER OF SHARES AUTHORIZED (Rider may be attached)	NUM	BER OF SHAR	ES ISSUED AND OUTSTANDING (Rid	er may be attached)		
Without par value Date February 10 19 95 By: RONALD J. HALL PRINT OR TYPE NAME OF OFFICER SIGNING President DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:	Number of Shares Class / Series	Num	ber of Shares	Class / Series			
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Date February 10 19 95 By: RONALD J. HALL PRINT OR TYPE NAME OF OFFICER SIGNING President DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:			o, o pido	oo ay o common			
Form 3' 1995 RONALD J HALL PRINT OR TYPE NAME OF OFFICER SIGNAM THE OF OFFICER SIGNAM President DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:	Without par value	Wit	hout par	value ,			
Form 3' 1/95 DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:	Datc February /o95	Ву:	null	Huel G			
Form 3' 1/95 DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:		RON	ALD J. HA	LI/	<u></u>		
DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:	A						
			Pres		<u> </u>		
	· -						

ROLAND O. FOURNIER, ESQ. 250 EDDIE DOWLING HIGHWAY NO. SMITHFIELD RI 02896

PAID P2533 Filing Fee \$50.00 Payable to: Secretary of State

PLEASE TYPE or PRINT

State of Rhode Island and Providence Plantations Office of The Secretary of State

File Annually LLC: Sept. 1 - Nov. 1 CORP: Jan. 1 - March 1

100 North Main Street Providence, Rhode Island 02903-1335 401-277-3040

Corporate ID:	14962	Annual Report f	or the year:	1994
Name of Business Entity:		Vision	n Associates Inc	
Business entity organized under the laws of the Federal Taxpayer Identification Number: For foreign entity, address and telephone numbers.		- kx) []	nty is (check one): Business Corporation (See RIG Professional Service Corporatio Limited Liability Company (Se	on (See RIGL Chapter 7-5.1)
		communicat	ind mailing address of contact pions may be directed: Ronald J. Hall, Pre	
	· · ·		148 Social Street	
		-	Woonsocket, R. I.	<u> </u>
Address and telephone of the principal office Island (Provide street address - Not P.O. Box 148 Social Street	x):	Brief statem	ent of the character of business	conducted in Rhode Island:
Woonsocket, R. I	. 02895			_
		_ Date of Org	anization: 11/7/75 //	1/13/15 mncs
Phone: (401) 769-2755	<u> </u>	Date of Qua	lification to do business in Rho	ode Island (if foreign entity):
	THE NAMES O	F THE OFFICERS	SARE:	
CHIFF EXECUTIVE OFFICER OR TO PRESIDENT IO	Check One: STRE	ET ADDRESS	CITY/STATE	ZIP COD
Ronald J. Hall Grief Operating Oppicer or 🖫 Vice president		School Road	Smithfield, R	R. I. 02917
Joseph L. Rowey		n Way	North Smithfield	ZIP COD
Joseph L. Rowey General Stream Land Control	5 Franklin	n Way	North Smithfield	1, R. I. 02896 ZIPCOD
Ronald J. Hall		School Road	Smithfield, F	R. I. 02917
NAME:		F THE DIRECTOR	ES ARE:	
NAME	STRI	ET ADDRESS	CITY/STATE.	ZIP COD
NAME	STRE	EET ADDRESS	CITY/STATE	ZIP COD
NUMBER OF SHARES AUTHORIZED	(If Applicable)	NUMBER OF	SHARES ISSUED AND OUT	
NUMBER 2,000		NUMBER	66 2/3 plus	FILED
C1.ASS Common		CLASS	Common	
SERIES		SERIES		FEB 2 2 1994 By <u>1558 mnc</u>
PAR VALUE OR WITHOUT PAR Without	Par Value	PAR VALUE WITHOUT PAR	OR Without Par	<i>'</i>
DateFebruary_18,	, 19 <u>_94</u> . By	Mu	Id He	<u> </u>
	PRĪ	RONALD J. 1		··

President

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

Corporate ID	0014	962	Annual Report for the	e year
First:	The name of the	ne corporation is	Vision Associates	Inc
SECOND:	It is incorpo	rated under the laws of.	Rhode Island	
THIRD:	Character of b	ousiness, briefly stated, is	any lawful business	
Fourth:	If foreign co	rporation, address of its	principal office	
Г ІГТН:	Business addre	ss in Rhode Island	148 Social Street, Woonso	cket, R. I. 02895
Ѕіхтн:	Names and ad	dresses of its directors ar		(Attach rider if necessary)
		Director		
	•••••	Director		
•		Director		
Ronald	J. Hall	President	170 Mann School Road,	Smithfield, R. I. 02
Joseph	L. Rowey	Vice Presi	dent 5 Franklin Way, Nor	th Smithfield, R. I. 0289
Joseph	L. Rowey	Secretary	5 Franklin Way, Nor	th Smithfield, R. I. 0289
Ronald	J. Hall	Treasurer	170 Mann School Road,	Smithfield, R. I. 029
SEVENTH	: Number of	Shares authorized:		Par Value or statement that
No. of Sha	ares	Class	Series	shares are without par value
2,0	00	Common	Fan 2 2 .	No par
Еібнти:	Number of S	hares issued:	3 Phononia	Par Value or statement that
No of Sha	res	Class	Series	shares are without par value
66-2/3 pl	us 66-2/3	Common		No par
Dated Fe	bruary 16,	19 <u>93</u>	VISION ASSOCIATES, I	NC.
			By (Mall)	(ILI)())
(Re	nort must be sign	ed by an officer)	Title President	

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0014862		Annual Report for t	Annual Report for the year1992		
First: The name of the	e corporation is	Vision Associ	atas Inc		
SECOND: It is incorpora	ated under the laws of	Rhode Island			
THIRD: Character of bi	usiness, briefly stated, is	any lawful business			
FOURTH: If foreign cor	poration, address of its	•			
FIFTH: Business addres	s in Rhode Island		ocket, R. I. 02895		
SIXTH: Names and add	dresses of its directors an		(Attach rider if necessary)		
	Director				
	Director				
	Director				
Ronald J. Hall	President	13 Jackson Ave., J	ohnston, R. I.		
Joseph L. Rowey	Vice President	dent 5 Franklin Way, N	orth Smithfield, R.I. 0289		
Joseph L. Rowey	Secretary	5 Franklin Way, N	orth Smithfield, R.I. 0289		
Ronald J. Hall	Treasurer	13 Jackson Ave.,	Johnston, R. I.		
SEVENTH: Number of S	Shares authorized:		Par Value or statement that		
No. of Shares	Class	Senes	shares are without par value		
2,000	Common	Rec'd & Filed 750	Par Value		
Eіднтн: Number of Si	hares issued:	PLPHI4 15P	Par Value or statement that		
No. of Shares	Class	Scries	shares are without par value		
66-2/3 plus 66-2/3	Common		no par value		
Dated February 24,	19 . <mark>92</mark>	VISION ASSOCIATES, (Name of Corporation) By	INC.		
(Penart must be sign	ed by an officer\	Title Vice- President			

Form 31 1/85

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

Corporate ID001	4962	Annual Report for the year	ır1991
FIRST: The name of th	e corporation is		Inc.
7 N. 178 - Pr		Vision Associates	
		Rhode Island	
THIRD: Character of b	usiness, briefly stated, is	any lawful business	
FOURTH: If foreign cor	poration, address of its pr	incipal office	
FIFTH: Business addres	s in Rhode Island 148	Social Street, Woonsocket,	R.I. 02895
SIXTH: Names and add	dresses of its directors and	Address (including number	(Attach rider if necessary , street, zip code)
Ronald J. Hall	President 13	3 Jackson Ave., Johnston, R.	.I.
Joseph L. Rowey	5 Vice Preside	Franklin Way, North Smithfi	ield, R.I. 02895
Joseph L. Rowey	Secretary	5 Franklin Way, North Smith	
Ronald J. Hall	Treasurer	13 Jackson Wave., Johnston	, R.I.
	Shares authorized:		Par Value or statement that shares are without
No. of Shares	Class Common	Series	par value No Par
2,000	Common	PAID	
Eіднтн: Number of S	hares issued:	ANY R.A. 1001	Par Value
No. of Shares	Class	Series	or statement that shares are without par value
66-2/3 plus 66-2/3	Common		No Par
Dated January 11,	19 91	VISION ASSOCIATES, INC	
	I	(Name of Corporation)	>)
(Report must be sign	ed by an officer)	Title President	

Filing Fee \$15.00

Form 31 1/85

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

Corporate ID 14966	7	Annual Report	for the year	1990
FIRST: The name of	the corporation is	VISION ASSOCIATES, I	NC.	
SECOND: It is incorp	porated under the laws of	RHODE ISLAND		
THIRD: Character o	f business, briefly stated, is	any lawful busine	SS	
FOURTH: If foreign	corporation, address of its	principal office		
FIFTH: Business add	lress in Rhode Island 148	3 Social Street, Woon	socket, R.	I. 02895
SIXTH: Names and a	addresses of its directors an		cluding number, stree	(Attach rider if necessary)
	Director			
	Director			•••••
	Director	13 Jackson Ave		······
Ronald J.	Hall President	Johnston, R. 1 5 Franklin Way	•	•••••
Joseph L.	Rowey Vice Presid	o mankiin way		•••••
Joseph L.	Rowey Secretary	same as above		
Ronald J.	Hall Treasurer	13 Jackson Ave Johnston, R. 1		
SEVENTH: Number	of Shares authorized:		10676	Par Value
No of Shares	Class	Series 6.7	PAID	or statement that shares are without par value
2,000	common		PAID	no par
			- ^	. 1
EIGHTH: Number of	f Shares issued:		OCI 20 DA	A Par Value or statement that
No. of Shares	Class	Series 5 F	,0 1	shares are without par value
66 2/3 plus 66 2/3	common			no par
Dated OとTOBA	R. A.T., 1994	VISION ASS	SOCIATES, IN	VC.
		By (mull /	tall	1
(Renort must be s	igned by an officer)	Title Prosessen	7	

Form 31 1/85

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

Corporate ID		Annual Report for the year.	1989
FIRST: The name of the	corporation is VISIO	N ASSOCIATES , INC.	······
SECOND: It is incorporate	ted under the laws of	RHODE ISLAND	
		any lawful business	
FOURTH: If foreign corp	oration, address of its prin	cipal office	
FIFTH: Business address	in Rhode Island 148 Sc	ocial Street, Woonsocket, R.	I. 02895
SIXTH: Names and addr	resses of its directors and of	fficers: Address (including number, str	(Attach rider if necessary)
	Director		
	Director		
		13 Jackson Avenue	
Ronald J. Hall	President	Johnston, R. I. 5 Franklin Way	
Joseph L. Rowey	Vice President		•••••••••••••••••••••••••••••••••••••••
Joseph L. Rowey	Secretary	same as above	
Ronald J. Hall	Treasurer	13 Jackson Avenue Johnston, R. I.	
SEVENTH: Number of SI	hares authorized:		Par Value
No. of Shares	Class	Series 24 48516	or statement that shares are without par value
2,000	common	PAID	no par
Eighth: Number of Sha	ares issued:	OCT 2 6 1990	Par Value or statement that
No. of Shares	Class	SECY OF STATE	shares are without par value
66 2/3 plus 66 2/3	common		no par
Dated Detable a		VISION ASSOCIATES, INC.	
(Report must be signed	By by an officer) Tit	David +	

Form 31 1/85

State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 270 WESTMINSTER MALL PROVIDENCE, RHODE ISLAND 02903

Corporate ID 14962		Annual Report for	the year 1988
FIRST: The name of the c	corporation isVi.s.		······································
Second: It is incorporate	ed under the laws of		
THIRD: Character of busin	ness, briefly stated, is	rendering professional.	.services.of.optometrists.
FOURTH: If foreign corpo	ration, address of its 1	principal office	
Fifth: Business address in	n Rhode Island14	48 Social Street, Woonso	ocket, R.I. 02895
SIXTH: Names and addres	sses of its directors an	Address (includin	(Attach rider if necessary)
Ronald J. Hall	Director Executive V	ice-President 12 Smit	th Avenue, Greenville, R.1
Emery A. Houle			tg. House Rd., Woon., R.I. 02895
			on., R.I. 02895
Ronald J. Hall	Secretary		oppositio P. I
Seventh: Number of Sha	Treasurer	12 Sill til Aveitue, di	
No. of Shares	Class	Series	Par Value or statement that shares are without par value
2000	common	PAID	no par
EIGHTH: Number of Share	es issued:	MAR 1.5 1988	Par Value or statement that
No. of Shares	Class	Series	shares are without par value
200	common	•	no par
Dated February 29, (Report must be signed by	,	Wision Associates, Inc. (Name of Corporation) By Cinc 10h	Ruez

State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 270 WESTMINSTER MALL PROVIDENCE, RHODE ISLAND 02903

		Annual Report for	the year 1986
he corporation is	VISIO	N ASSOCIATES INC.	
orated under the lav	vs of	Rhode Island	
		•	
ess in Rhode Island	1.48S		nsocket, R.I. 02895
	Office		(Attach rider if necessary) ing number, street, zip code)
Executive	Vice-F	resident	•
B x8	XXX	12 Smith	n Ave., Greenville, R.
Presi	dent	227 Elder Ballo	ou Mtg. House Rd.
Vice	Presiden	t447CottageSt.	Woon. R.I. 02895
		11 11 11	0 0 11
	•	•••••••••••••••••••••••••••••••••••••••	•••••••••••••••••••••••••••••••••••••••
Trea	surer	.12Smi.th.Ave.,(Greenville, R.I.
Shares authorized:			Par Value or statement that
Class	R _N	Series	shares are without par value
common	/07/86		no par
Shares issued:	PAEI		Par Value or statement that
Class	- -	Series	shares are without par value
common	0230A0	A	no par
19 .86	V		, INC.
~ ~ 4006 V	/ B	= 1 10101	Ring
	corporation is briefly started under the law business, briefly started or poration, address ess in Rhode Island directed. Dire Dire Executive Dire Executive Dire Common Chares issued: Class Common Chares issued:	common Class Common Class Common 19.86	corporation is VISION ASSOCIATES INC. Director Executive Vice-President Director Executive Vice-President 227 Elder Ballo Vice President 447. Cottage St. Secretary Treasurer 12 Smith Ave. Scares Scares Common Class Common Class Common Class Class Scares Class Scares Class Scares Class Scares Class Scares Class Cla

Form 31 1/85

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 270 WESTMINSTER MALL PROVIDENCE, RHODE ISLAND 02903

Corporate ID 14962	······································	Annual Report for	the year 1985
First: The name of th	-		
Second: It is incorpor	_		
THIRD: Character of b	usiness, briefly stated, isan		S
FOURTH: If foreign co	rporation, address of its princ		
Fifth: Business addres	ss in Rhode Island		
Roland O. Fourn	ier, Esq. 250 Eddy	Dowling Hwy.,No.	Smithfield,R.I.02895
SIXTH: Names and add	dresses of its directors and off		(Attach rider if necessary) ig number, street, zip code)
	Director		
Ronald J. Hall	Executive Vice-P		ield, R.I
Emery A. Houle	President 2	27ElderBallou	4eetingHouse Road
Joseph L. Rowey			Woon. R.I.
Joseph L. Rowey	Secretary	447 Cottage St	,WoonR.I.
Ronald J. Hall	Treasurer	Smithfield,R.	I. .
	Shares authorized:		Par Value or statement that shares are without
No. of Shares	Class Common	Series	par value no par
Eighth: Number of S	hares issued:		Par Value or statement that shares are without
No. of Shares 200	Class	Series	par value
200	COMMON		no par
Dated February	19V.	ISIONASSOCIATES.	···ING.
RBCE	MAIN ♥¶; By By	ne of Corporation) A.	Houle
(Report must be signe	,	· Presidely	

Filing fee: \$15.00

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

Annual Report for the year 19

1984

FIRST: The name of the corporation is VISION ASSOCIATES, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is any lawful business

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island

Roland O. Fournier, Esq. 194 Main Street, Woonsocket, R.I. 02895

Sixth: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

Name

Office

Address

Director

Director

Ronald J. Hall

cutive Vice-President

Smithfield, R.I.

Emery A. Houle
Joseph L. Rowey

President

227 Elder Ballou Mtg. House Rd.

Woon., R.I.
Vice President 447 Cottage St., Woon., R.I.

.. ..

Secretary

Ronald J. Hall

2000

Treasurer

Smithfield, R.I.

(If additional space is needed, attach rider)

SEVENTH: Number of Shares authorized:

No. of Shares

Class Common Series

Par Value or statement that shares are without par value

no par

EIGHTH: Number of Shares issued:

No. of Shares

Class

Series

Par Value or statement that shares are without par value

200

common

no par

Dated:

February

19,83

VISION ASSOCIATES, INC.

(Yame of Corporation)

By Title

84

(Report must be signed by an officer)

If the corporation has changed its registered office and/or its registered agent, Form #9 must be filed. Please contact Corporation Division for information. 277-3040

Filing fee. \$15.00

To be filed annually between January 1st and March 1st

State of Chode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

Annual Report for the year The name of the corporation is VISION ASSOCIATES, INC. SECOND: It is incorporated under the laws of Rhode Island any lawful business THIRD: Character of business, briefly stated, is FOURTH: If foreign corporation, address of its principal office FIFTH: Business address in Rhode Island (blank reports will be mailed to this address) Roland O. Fournier, Esq. 194 Main Street, Woon., R.I. 02895 SIXTH: Names and addresses of its directors and officers: (Addresses must include street and number, if any) Name Office Address Director Director Executive Vice-President Ronald J. Hall 169554KP Smithfield, R.I. Emery A. Houle 227 Flder Ballou Mtg. House Rd. President Woon. R.I. Vice President 447 Cottage St., Woon., R.I. Joseph L. Rowey Secretary Ronald J. Hall Smithfield, R.I. Treasurer (If additional space is needed, attach rider) Par Value or statement that shares are without par value SEVENTH: Number of Shares authorized: No. of Shares Class Series 2000 common no par Par Value statement that ares are without par value EIGHTH: Number of Shares issued: No. of Shares Class Series 200 no par common 3 6 ISION ASSOCIATES, INC. Dated: February 19 83 (Report must be signed by an officer)

If the corporation has changed its registered office and/or its registered agent, Form #9 must be filed. Please contact Corporation Division for information. 277-3040

Filing fee: \$15.00

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

		Anr	nual Report fo	r the year	1982
First:	The name of t	he corporation is	VISION ASS	OCIATES,	_ INC
SECOND:	It is incorpo	rated under the la	ws of Rhod	e Island	
THIRD:	Character of b	usiness, briefly sta	ted, is any	lawful	business
					·
		orporation, addres	s of its princ	cipal office	
Г ІГТН:	Business addr	ess in Rhode Islan			
Sixth:	Names and ac	ddresses of its dire	ctors and off	icers:	•
	(Addresses m	ust include street and nu	imber, if any)		
1	Namo	Office		Address	
		Director			
Ronald J.		Director Executive Vice	-President	Smithfi	eld,R.I.
Emery A. H	loule	President	227 Elder	Ballou	Mtg. House Rd., Woon.,R.I
Joseph L.	Rowey	Vice President	447 Cotta	ge St.,W	oonR.I
91		Secretary			
Ronald J.	Hall ce is needed, attac	Treasurer th rider)	Smithfiel	đ,R.I.	
Seventh	: Number of	Shares authorized	l:		Par Value
No. of She	ıres	Class	Series		ares are without par value
2000		common			no par
Eighth:	•	Shares issued:	Series		Par Value r statement that ares are without par value
200		Common		3 15 82	no par
Dated: Febr	-	19 82 (By) 161982 / Title	VISION AS Name of Corporation In off	~	inc.
	•	100	(Report must	be signed b	y an officer)
14 Abo -	ornaration has a	hanged its registerer	d office and/or	1 2 1 2	red agent

Form #9 must be filed. Please contact Corporation. Division for info@affon. 277-3040

Filing fee: \$15.00

To be filed annually between January 1st and March 1st

State of Khode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

OF

	ISION ASSOCIA	TES INC.		
Pursuant to the provisions amended, the undersigned corporate First: The name of the configuration of the configur	oration harehy s	chmits the follo	wing annual r	enort ·
SECOND: It is incorporate	ed under the law	s of Rhode	Island	
THIRD: The address of its 1				
and the name of its registered ag Roland O. Fournier, Esc				
FOURTH: If a foreign corpountry under the laws of which it	•		al office in the s	tate or
. , ,				
FIFTH: The character of Island, briefly stated, is SIXTH: The names and res	any lawful l	ousiness		· · · · · · · · · · · · · · · · · · ·
Name	Director		Addiess	
	Director			
			•	
	Director		•	
	Director			
•				
Page & Houle	Director	Elder Ballow	Mra House	Rd. Woon.,R.
Emery A. Houle Ronald J. Hall Executive Joseph/Mowey	President Vice-Pres.	Smithfield,	Rhode Islan	d
Joseph/Rowey	~ .		•	
Joseph L. Rowey Ronald J. Hall	Secretary Treasurer	447 Cottage Smithfield,		
SEVENTH: The aggregate n by classes, par value of shares, sh	number of shares v ares without par v	vhich it has authoralue,andscries,i	ority to issue, it fany,withinacl	emized ass,is:

Number of Shares Series Par Value per Share or Statement that Shares are without Par Value per Share are without Par Value per Shares are without Par Value per Shares are without Shares are without Par Value per Shares are without Shares are without Par Value per Shares are without Shares are without Par Value per Shares are without Shares are without Par Value per Shares are without Shares are without Par Value per Shares are without Shares are without Par Value per Shares are without Shares are without Par Value per Shares are without Shares are without Par Value per Shares are without Shares are without Par Value per Shares are without Shares are without Par Value per Shares are without Shares are without Par Value per Shares are without Shares are without Par Value per Shares are without Shares are without Par Value per Shares are without Shares are without Par Value per Shares are without Shares are without Par Value per Shares are with Par Value per Shares are without Par Value per Shares are with Par

PR 28 1981 15008

Form 31 30M 11-76

Eighth: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class_	<u>Series</u>	or Statement that Shares are without Par Value
200	common		no par
			-

Dated February 27, , 1981

By Chiph L Rover OD.

Its V P-

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

OF

	01			
	VISION ASSOCI	LATES INC		
amended, the undersign First: The name	of the corporation is	by submits the Vision Asso	followin ociates	g annual report:
SECOND: It is inc	orporated under the	laws of Rhoo	le Islan	nd
	ss of its registered off t, Woonsocket, R			
and the name of its regist Roland O. Four				
FOURTH: If a fore	eign corporation, the	address of its pr	cincipal of	ffice in the state or
country under the laws of	-		····c·par o	
country under the laws of	-			
		,		•
FIFTH: The chara	cter of the business	in which it is	actually o	engaged in Rhode
Island, briefly stated, is	any lawful bus	siness		
SIXTH: The names	s and respective addr Office	esses of its direc		officers are: ddress
	Director			
	Director	• •		
	Director			
	Director			• <u>• • • • • • • • • • • • • • • • • • </u>
	Director			
	Director			
Emery A. Houle	President	227 Elder E	Ballou M	Atg_House Rd. Woonsocke
Ronald J. Hall Ex Joseph L. Rowey	ecutive Vice Pre Vice Preside	esident Smit) PNI 447 Cottac	nfield, ge St.,	R.I. Woonsocket, R.I.
Joseph L. Rowey	Secretary	447 Cottage	St., Wo	oonsocketrR.I.
Ronald J. Hall	Treasurer	Smithfield	R.1.	
SEVENTH: The agg by classes, par value of sh	regate number of sha ares, shares without		ries,if any	
Number of Shares	Class	Series		or Statement that Shares are without Par Value
2000	common		1	no par
		,	2552A14	

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Par Value per Share or Statement that Shares are without Par Value Number of Shares Series Class no par 200 common

February 29,19 80 Dated

VISION ASSOCIATES INC.

By Way I Know UP SIC.

Its Vice-Pres. & Secy.

1979

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

 \mathbf{OF}

	VISION ASS	OCIATES INC.		
amended, the undersign	rovisions of Section led corporation here of the corporation is.	by submits the fo	General Laws, 1956, as llowing annual report: sociates Inc.	i
SECOND: It is inc	orporated under the	laws of Rhode	: Island	,
	ss of its registered off	_	is 194 Main Street	: ,
and the name of its regis		Island at such add		
FOURTH: If a for country under the laws of			ipal office in the state or	
· · · · · · · · · · · · · · · · · · · ·			···· • · · ·	
FIFTH: The chara Island, briefly stated, is			ually engaged in Rhode	
	•••			
Sixth: The name	s and respective addre	esses of its director	s and officers are:	
	Director			
	Director		e e	
	Director	· · · · · · · · · · · · · · · · · · ·		
	Director			
	Director			
	Director			
Emery A. Houle	President Vice Preside	227 Elder Ball Woonsocket nt	ou Meeting House R	d.,
	Secretary	•	•	
Ronald J. Hall	Treasurer			
SEVENTH: The agg by classes, par value of sh			hority to issue, itemized ,if any, within a class, is: Par Value per Share	
Number of		_ 3	or Statement that Shares are without	
Shares	Class	<u>Serjes</u> Vi	Par Value	
2000	common	79	No Par	
		- • •		
		759		
		• 3 A	,	
		4 - 6 0		
		• •	-0	
			13 1979	
Form 31 30M 11-78		15.(15.(WYK TO	160
		008L	MAR 13 1979	r Li

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares Class Series Par Value per Share or Statement that Shares are without Par Value

200 Common No Par

Dated February , 1979

Vision Associates Inc.

(NAME OF CORPORATION)

Rν

Pracident

Filing fee: \$15.00

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

	ANNUAL O		
	VISION ASSOCI	ATES INC.	
amended, the undersign	ed corporation here	7.1.1-118 of the Ge	neral Laws, 1956, as owing annual report:
SECOND: It is inco	orporated under the	laws of Rhode I	sland
		fice in Rhode Island is	194 Main Street,
and the name of its regist	ered agent in Rhode Roland O.	Island at such addre Fournier	ss is
FOURTH: If a fore country under the laws of	which it is incorpora	ated is	oal office in the state or
		· · · · · · · · · · · · · · · · · · ·	
	cter of the business any lawful		lly engaged in Rhode
SIXTH: The names	and respective addi	resses of its directors	and officers are:
	Director		
,	Director		
Emery A. Houle	President	227 Elder Ball	ou Meeting House Rd Woonsocket
	Vice Presid	ent	
	Secretary		
Ronald J. Hall	Treasurer		•
SEVENTH: The agg by classes, par value of sh	regate number of sha ares, shares without	ares which it has auth parvalue,andseries,i	ority to issue, itemized fany,withinaclass,is:
-			Par Value per Share or Statement that
Number of Shares	Class	3 Şer <u>i</u> es	Shares are without Par Value
2000	common	79	No Par

6756A14····15.00BL

MAR 13 1979

Form 31 33W 11-78

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares 200

Class Common Series

Par Value per Share or Statement that Shares are without Par Value No Par

Dated February 20, 19 79

Vision Associates Inc.

(NAME OF CORPORATION)

Provident

Filing fee: \$15.00

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

OF

VISIO	N ASSOCIATES INC	•	
amended, the undersigne		submits the follow	eneral Laws, 1956, as ing annual report: ates Inc.
	•	•	
SECOND: It is income	rporated under the la	ws of R.I.	
Building, Provider and the name of its regist	ice, R.I.	sland at such addre	is 401 Turks Head
FOURTH: If a fore country under the laws of		=	pal office in the state or
			mark to the second
FIFTH: The chara Island, briefly stated, is			ally engaged in Rhode
SIXTH: The names ar	nd respective addresse	 or of its directors an	d officers are
Name	Office	sol its directors and	Address
	Director		
	Director	227 Elder Ba	llou Meeting House Rd.
Emery A. Houle	${f President}$	Woonsocket, R	
	Vice Preside	ent	
Raymond J. Surdut	Secretary	401 Turks Ho	ad Bldg., Prov., R.I.
Ronald J. Hall	Treasurer	13 Jackson A Johnston, R	i.i.
SEVENTH: The agg by classes, par value of sha	gregate number of sha ares, shares without p	ires which it has aut ar value, and series,	hority to issue, itemized if any, within a class, is:
Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value

Number of Shares	Class	<u>Series</u>	or Statement that Shares are without Par Value
2000	common	Ĕ	no par

JUN 1 4 1977

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Cluss	<u>Series</u>	or Statement that Shares are without Par Value
200	common		no par

Dated Jan. 5

, 19 77

Vision Associates Inc.

, 4

Filing fee: \$15.00

To be filed annually between January 1st and March 1st

State of Chode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

	O	. '	
	VISION ASSOC	IATES INC.	
amended, the unders		7-1.1-118 of the by submits the fol	General Laws, 1956, as lowing annual report:
SECOND: It is i	incorporated under the	laws of R.I	
THIRD: The ad	dress of its registered o	ffice in Rhode Isla	and is
	l Turks Head Bldg.		
	egistered agent in Rhod ymond J. Surdut		ddress is
Fourth: If a	foreign corporation, the	address of its pri	ncipal office in the state or
	and the second s		B 1 200 00 00 00 00 00 00 00 00 00 00 00 00
FIFTH: Thecha	racter of the business in	which it is actually	y engaged in Rhode Island,
briefly stated, is	any lawful busines	S	
		• •	
SIXTH: The na	mes and respective add Office	resses of its direct	ors and officers are:
	Director		
	·	* * *	•
	Director		
	Director		· · · · · · · · · · · · · · · · · · ·
	Director Director		
Emery A. Houle			Ballou Meeting H ouse Ro , R.I.
	Vice Preside	nt	
Raymond J. Surd	ut Secretary	401 Turks He	ad Bldg., Prov.,R.I.
Ronald J. Hall.	Treasurer	Johnston ,	Avenue R.I.
SEVENTH: The	aggregate number of sh f shares, shares without	ares which it has a par value, and seri	authority to issue, itemized les, if any, within a class, is:
Number of			Par Value per Share or Statement that Shares are without
Shares _	Cl <u>ass</u>	<u>Series</u>	Par Value
2000	common		no par
		뎣	
		14-7	
		기 의별	
		# 7 #_2	
		ON 14-77 왕() (179 년)	JUN 141977
FORM 31 50M 9-72		្វេ	7/
		×	17,

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	Series	or Statement that Shares are without Par Value
200	common		no par

Dated Jan. 5 , 19 76

Vision Associates Inc.
(NAME OF CORPORATION)

// // 0

Presiden