

No. W 4720		Due no later than September 30, 2003 Annual Report Form		2. Registered Agent and Office NO PO BOX		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address - Correct in this box, if applicable VISTA EYECARE NETWORK, LLC LEGAL C MINGLE 296 GRAYSON HWY LAWRENCEVILLE, GA 30045-5798 -5750		CORPORATION SERVICE COMPAN 1401 SHORELINE DR STE 2 BOISE, ID 83702		
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature		
4. Limited Liability Companies: Enter Names and Addresses of Members.						
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	
Sole Member	NATIONAL VISION, INC. 296 Grayson Highway, Legal / C.Mingle, Lawrenceville, GA 30045-5750					
5. Organized Under the Laws of:	6.  Signature _____ Date <u>7/14/03</u> Name <small>(Typed or Printed)</small> <u>Mitchell Goodman</u> Vice President and Title <u>Secretary</u>					
DELAWARE W 4720						