

1.) CORPORATION NAME:

THE AMERICAN OPTOMETRIC ASSOCIATION

DUE DATE: **1/31/2011**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E. AUTH IN VI CT CORPORATION SYSTEM 4701 COX RD STE 301 GLEN ALLEN, VA 23060-6802**

SCC ID NO: **F0500209**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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3.) CITY OR COUNTY OF VA REGISTERED OFFICE:
HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:
OH

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 243 N. LINDBERGH BLVD, FLOOR 1

CITY/ST/ZIP: ST. LOUIS, MO 63141-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	RANDOLPH E BROOKS, O.D., F.A.A.O.	
TITLE:	Immed Past Pres	
ADDRESS:	ADVANCED EYECARE ASSOCIATES, LLC	
	WEST TEN PLAZA, 410 RTE 10, STE 202	
CITY/ST/ZIP/CO:	LEDGEWOOD, NJ 07852-	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	DORI CARLSON, O.D., F.A.A.O.	
TITLE:	President-Elect	
ADDRESS:	P.O. BOX O, 121 BRIGGS AVENUE N.	
CITY/ST/ZIP/CO:	PARK RIVER, MD 58270-	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	JOE E ELLIS, O.D.	
TITLE:	President	
ADDRESS:	PO BOX 256, 109 W. 5TH ST.	
CITY/ST/ZIP/CO:	BENTON, KY 42025-	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	RONALD L HOPPING, O.D., M.P.H.	
TITLE:	VICE PRESIDENT	
ADDRESS:	HOPPING EYE ASSOCIATES LTD., LLP	
	1234 BAY AREA BLVD., STE. E	
CITY/ST/ZIP/CO:	HOUSTON, TX 77058-	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	MITCHELL T. MUNSON, O.D.	
TITLE:	Sec. / Treas.	
ADDRESS:	8925 RIDGELINE BLVD., STE. 107	
CITY/ST/ZIP/CO:	HIGHLANDS RANCH, CO 80129-2052	

NAME:	ROBERT BRODERICK	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	CFO		
ADDRESS:	243 N. LINDBERGH BLVD., FLOOR 1		
CITY/ST/ZIP/CO:	ST. LOUIS, MO 63141-		

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

<u>/s/ ROBERT BRODERICK</u>	<u>ROBERT BRODERICK, CFO</u>	<u>1/21/2011</u>
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.