2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 702966

Apr 01, 2010 Secretary of State

Entity Name: FLORIDA LIONS EYE BANK, INC.

US

Current Principal Place of Business: New Principal Place of Business:

900 NW 17TH ST 900 NW 17TH STREET

#347 #347

MIAMI, FL 33136 MIAMI, FL 33136

Current Mailing Address: New Mailing Address:

900 NW 17TH ST 900 NW 17TH STREET

#347

MIAMI, FL 33136 US

FEI Number: 59-0967012 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

FOUT-CARAZA, ELIZABETH 900 N.W. 17 STREET FLORIDA LIONS EYE BANK MIAMI, FL 33136 US

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:

MIAMI, FL 33136

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

MANSOLILLI, BUD Name: Address: 939 BUNKER HILL DRIVE City-St-Zip: NAPLES, FL 34110

Title: Name: KLUG, JIM

Address: 4257 32 AVENUE SW City-St-Zip: NAPLES, FL 34116

Title:

BRAUSS, JAMES Name: Address: 1528 NE 4TH AVENUE

City-St-Zip: FORT LAUDERDALE, FL 33304

Title:

Name: JONES, STACEY Address: 19140 SW 22ND PLACE

City-St-Zip: MIAMI, FL 33056

Title:

GALLIANI, ROSA Name: 4851 NW 99TH COURT Address: City-St-Zip: DORAL, FL 33178

Title:

SAN MIGUEL, LUIS Name: Address: 9225 SW 63 STREET MIAMI, FL 33173 City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ELIZABETH FOUT-CARAZA ED 04/01/2010