2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Oct 06, 2011 **DOCUMENT# 730754** Secretary of State

Entity Name: VISUALLY IMPAIRED PERSONS OF SOUTHWEST FLORIDA, INCORPORATED

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

35 WEST MARIANA AVENUE NORTH FORT MYERS, FL 33903

Current Mailing Address: New Mailing Address:

P.O. BOX 3464

N. FT. MYERS, FL 339183464

FEI Number: 59-1665257 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:

FOWLER, DOUGLAS 5809-2 NÉW FOUNDLAND CIRCLE FT. MYERS, FL 33907

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

OFFICERS AND DIRECTORS:

PRES

CONNELL, EVAN MR. Name: Address: 9962 VIA SAN MARCO LOOP City-St-Zip: FORT MYERS, FL 33905 US

Title:

Name: YOUMANS, RACHELLE MRS. Address: 6679 WILLOW LAKE CIRCLE City-St-Zip: FORT MYERS, FL 33966 US

Title: SEC

CABO SELLERS, CYNTHIA MRS Name: Address: 40121 LITTLE FARM RD City-St-Zip: PUNTA GORDA, FL 33982 US

Title: TREA

Name: KAPLAN, OD, ANGELA

15735 CALOOSA CREEK CIRCLE Address: City-St-Zip: FORT MYERS, FL 33908 US

Title: DIR

DAVIS, A. ROBERTALEE MRS Name: 3472 CELESTIAL WAY Address:

NORTH FORT MYERS, FL 33903 US City-St-Zip:

Title:

CONRAD. DEBORAH Name: Address: 4423 SE 14TH PLACE CAPE CORAL, FL 33904 US 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: DOUGLAS FOWLER MR. 10/06/2011