FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # 741612

(6)

LIGHTHOUSE FOR THE BLIND OF THE PALM BEACHES, IN

Principal Place of Business		Mailing Address		# 4 CORTIN TO BELLEN DE LINGTO BITLES AVAILE LINEY BITEN BARNI BARNI BARNI BARNI DE LOS CAMBANI DE LOS CAMBANI	
7810 S DIXIE		7810 S DIXIE			
WEST PALM BEACH FL 33405		WEST PALM BEACH FL 33405-4820			
				3. Date Incorporated or Qualified 02/14/1978	3a. Date of Last Report 03/04/1996
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For
21		26. Ividining Address		59-6008622	Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.			CO 75 Addition of
22		27		5. Certificate of Status Desired	Fee Required
City & State		Cily & State		6. Election Campaign Financing	\$5.00 May Be
23	· ······	28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for in	
24	9. Name and Address of Current	29 30	<u> </u>	Florida Statutes 10. Name and Address of New Reg	Yes 2 No
KELLEY, RÖBERT J JR.			WILLIAM S. THOMPSON, PRESIDENT/CEO		
BARNETT BANK			82 Street Address (P.O. Box Number is Not Acceptable) LIGHTHOUSE FOR THE BLIND OF THE PALM BEACHES		
114 N. FEDERAL HWY.			92	THE TOTAL PROPERTY OF THE PARTY	THE THEM DESIGNED
BOYNTON BEACH FL 33435			i	SOUTH DIXIE HIGHWAY	Tee Total
			84 WEST	PALM BEACH	FL 85 Zip Code 33405
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent of both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 617.0503, Florida Statutes.					
agent. I am familiar with and accept the obligations of, Section 617.0503, Florida Statutes.					
SIGNATURE WILLIAM S. Thompson 3:06.97					
Signature, you or printed name of registered agent and the if applicable (NOTE: Re 12. OFFICERS AND DIRECTORS			legistered Agent signature	required when reinstating) ADDITIONS/CHANGES TO OFFICE	
TITLE	CD OFFICERS AND	DINECTONS DELETE	11 TITLE	CD CD	Change Addition
NAME	KELLEY, ROBERT R. JR		1.2 NAME	GODDARD, NED	
STREET ADDRESS	MANAGEM MANUAL ALA EL PROPERTE ENIOL		1.3 STREET ADDRESS	3216 N. FLAGLER DR.	
CITY-ST-ZIP	BOYNTON BEACH FL		1.4 CITY - ST - ZIP		3407
TITLE	VCD	☐ DELETE	2.1 TITLE	VCD	Change Addition
NAME	GODDARD, NED		2.2 NAME	GALLEGOS, JOSEPH	
STREET ADDRESS	3216 N. FLAGLER DR.		2.3 STREET ADDRESS	432 SAN FERNANDO DR.	
CITY-ST-ZIP	WEST PALM BEACH FL 33407		2 4 CITY-ST-ZIP	LAKE WORTH, FL 33461	
TITLE	SD	☐ DELETE	3.1 TITLE	SD NAMOV	Change X Addition
NAME	GALLEGOS, JOSEPH		3.2 NAME	BENYON, NANCY	
STREET ADDRESS	217 GREGORY ROAD		3.3 STREET ADDRESS	13373 KINGSBURY DR.	
CITY-ST-ZIP	WEST PALM BEACH FL	XI DELETE	3.4 CITY-ST-ZIP 4.1 TITLE	WEST PALM BEACH, FL 33	414 ☐ Change X Addition
TITLE NAME	QUINETTE, WILLIAM	DAT DECEME	4.1 TITLE 4. 2 NAME	KLETT, STANLEY D.	Cuange (23 Abouton
STREET ADDRESS	1839 S.W. 17TH STREET		4. 2 NAME 4.3 STREET ADDRESS	4100 RCA BOULEVARD, SUI	ਾਂਸ਼ 100
CITY-ST-ZIP	BOYNTON BEACH FL 33426		4.4 CITY-ST-ZIP	PALM BEACH GARDENS, FL	33410
TITLE	P	☐ DELETE	5.1 TITLE	THE PERIOD GRADUADS FO	Change Addition
NAME	THOMPSON, WILLIAM S	_	5.2 NAME		
STREET ADDRESS	7810 SO, DIXIE HWY.	:	5.3 STREET ADDRESS		
CITY-ST-ZIP	WEST PALM BEACH FL 33405		5.4 CITY - ST - ZIP		
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

FILED

Mar 17 1997 8:00am

Secretary of State