

2001 UNIFORM BUSINESS REPORT (UBR)

4/5

FILED

Apr 19, 2001 8:00 am
Secretary of State

04-05-2001 90099 014 ****70.00

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1. Entity Name

LIGHTHOUSE FOR THE BLIND OF THE PALM BEACHES, IN

Principal Place of Business

Mailing Address

7810 S DIXIE
WEST PALM BEACH FL 33405

7810 S DIXIE
WEST PALM BEACH FL 33405

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-6008622

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

WILLIAMS S THOMPSON PRESIDENT/CEO
7810 S. DIXIE HIGHWAY
LIGHTHOUSE FOR THE BLIND OF THE PALM BEACH
WEST PALM BEACH FL 33405

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	CD	☐ Delete
NAME	GODDARD, NED	
STREET ADDRESS	3216 N FLAGLER DR	
CITY-ST-ZIP	WEST PALM BCH FL	
TITLE	VCD	☐ Delete
NAME	GALLEGOS, JOSEPH	
STREET ADDRESS	432 SAN FERNANDO DR	
CITY-ST-ZIP	LAKE WORTH FL	
TITLE	SD	☐ Delete
NAME	BENYON, NANCY	
STREET ADDRESS	13373 KINGSBURY DR.	
CITY-ST-ZIP	WEST PALM BEACH FL 33414	
TITLE	TD	☐ Delete
NAME	KLETT STANLEY D	
STREET ADDRESS	4100 RCA BLVD STE 100	
CITY-ST-ZIP	PALM BCH GARDENS FL	
TITLE	P	☐ Delete
NAME	THOMPSON, WILLIAM S	
STREET ADDRESS	7810 SO, DIXIE HWY.	
CITY-ST-ZIP	WEST PALM BEACH FL 33405	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	Chairman	☒ Change ☐ Addition
NAME	Stanley D. Klett, Esq.	
STREET ADDRESS	4100 RCA Blvd., Suite 100	
CITY-ST-ZIP	Palm Beach Gardens, FL 33410	
TITLE	Vice Chairman	☐ Change ☐ Addition
NAME	GALLEGOS, JOSEPH	
STREET ADDRESS	524 North East 21ST. Court	
CITY-ST-ZIP	Wilton Manors, FL 33305	
TITLE	Secretary	☒ Change ☐ Addition
NAME	MCDERMOTT, LESLIE	
STREET ADDRESS	1208 Marine Way, Apt. A-107	
CITY-ST-ZIP	North Palm Beach, FL 33408	
TITLE	Treasurer	☒ Change ☐ Addition
NAME	EDWARD W. CRAWFORD, JR.	
STREET ADDRESS	506 Kingfish Road	
CITY-ST-ZIP	North Palm Beach, FL 33408	
TITLE	President	☐ Change ☐ Addition
NAME	WILLIAM S. THOMPSON	
STREET ADDRESS	7810 S. Dixie Highway	
CITY-ST-ZIP	West Palm Beach, FL 33405	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

3/28/01 (SW) 586-5600

CR2E037 (10/00)