

FILE NOW: FILING FEE IS \$61.25

FILED

Feb 13 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 768191 (9)

1. Corporation Name

INDEPENDENCE FOR THE BLIND, INCORPORATED



Principal Place of Business

Mailing Address

1278 PAUL RUSSELL ROAD
TALLAHASSEE FL 32301
US1278 PAUL RUSSELL ROAD
TALLAHASSEE FL 32301-7103
US3. Date Incorporated or Qualified
04/28/19833a. Date of Last Report
03/06/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

59-2288754

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes



No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KOCH, HAROLD ARTHUR J
1528 REECE PARK LANE
TALLAHASSEE FL 32301

81 Name

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

83

84 City

FL

85 Zip Code

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, or 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.

SIGNATURE

Harold Arthur Koch, Jr.
Signature, typed or printed name of registered agent and title if applicable.

Harold Arthur Koch, Jr.

2-10-97

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE
NAME HEATH, JAMES
STREET ADDRESS 1816 DOOMAR DRIVE
CITY-ST-ZIP TALLAHASSEE FL1.1 TITLE PD ☒ Change ☐ Addition
1.2 NAME mathis, linda
1.3 STREET ADDRESS 1008-1 Holland Drive
1.4 CITY-ST-ZIP Tallahassee, FL 32301TITLE D ☐ DELETE
NAME PONCHAK, KURT
STREET ADDRESS 452 RICHVIEW PARK CIRCLE, EAST
CITY-ST-ZIP TALLAHASSEE FL2.1 TITLE VD ☒ Change ☐ Addition
2.2 NAME Ponchak, Kurt
2.3 STREET ADDRESS 452 Richview Park Circle, East
2.4 CITY-ST-ZIP Tallahassee, FL 32301TITLE TD ☒ DELETE
NAME WINTERS, DEBORAH
STREET ADDRESS 1441 LIVE OAK DRIVE
CITY-ST-ZIP TALLAHASSEE FL3.1 TITLE PD ☒ Change ☐ Addition
3.2 NAME Corbin, Ruth
3.3 STREET ADDRESS 1553 Pine Forest Drive
3.4 CITY-ST-ZIP Tallahassee, FL 32301TITLE SD ☐ DELETE
NAME MATHIS, LINDA
STREET ADDRESS 1008-1 HOLLAND DR
CITY-ST-ZIP TALLAHASSEE FL4.1 TITLE SD ☒ Change ☐ Addition
4.2 NAME Walker, Annita
4.3 STREET ADDRESS 2920 Harwood Street
4.4 CITY-ST-ZIP Tallahassee, FL 32301TITLE D ☒ DELETE
NAME VREDENBURG, JAMES B.
STREET ADDRESS 1213 VICTORY GARDEN DR
CITY-ST-ZIP TALLAHASSEE FL5.1 TITLE D ☐ Change ☒ Addition
5.2 NAME Brinton, Darryl
5.3 STREET ADDRESS 2131 Blairstone Rd. Apt. 88
5.4 CITY-ST-ZIP Tallahassee, FL 32301TITLE VD ☐ DELETE
NAME ARMINGTON, MYCELL
STREET ADDRESS 2006 CASA LINDA COURT
CITY-ST-ZIP TALLAHASSEE FL6.1 TITLE D ☒ Change ☐ Addition
6.2 NAME Armington, Mycell
6.3 STREET ADDRESS 2006 Casa Linda Court
6.4 CITY-ST-ZIP Tallahassee, FL 32303

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.

SIGNATURE

Harold Arthur Koch, Jr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Harold Arthur Koch, Jr.

2-10-97 904-942-3658

Date

Daytime Phone #0007292

CFR2E037 (9/96)

**M Skip Koch
1528 Reece Park Lane
Tallahassee, Florida 32301**

**D Thomas Armington
2305 Killearn Center Blvd.
Apartment F-123
Tallahassee, Florida 32308**

**D Elizabeth Bowden
2235 Belle Vue Way
Tallahassee, Florida 32304**

**D James Heath
1816 Doomar Drive
Tallahassee, Florida 32308**

**D Lynda Jones
2912 Bylington Circle
Tallahassee, Florida 32303**

**D Belinda Mizell
1314 Jackson Street
Tallahassee, Florida 32303**

**D Judy Reazin
1242 Redfield Road
Tallahassee, Florida 32311**

**D W.O. Whittle
Lawrence Realty
37 North Cleveland Street
Quincy, Florida 32351**