

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004764

FILED  
Apr 28, 2011  
Secretary of State

**Entity Name:** NORTH FLORIDA LIONS EYE FOUNDATION, INC.

**Current Principal Place of Business:**

C/O WALTER MCLANAHAN  
7812 BLAKEFORD MILL LN  
JACKSONVILLE, FL 32256

**New Principal Place of Business:**

**Current Mailing Address:**

C/O WALTER MCLANAHAN  
7812 BLAKEFORD MILL LN  
JACKSONVILLE, FL 32256

**New Mailing Address:**

FEI Number: 83-0432246

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HICE, SHERRY K  
2033 RALEY CREEK DR E  
JACKSONVILLE, FL 32225 US

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

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:**

Title: C  
Name: MCLANAHAN, WALTER  
Address: 7812 BLAKEFORD MILL LN  
City-St-Zip: JACKSONVILLE, FL 32256

Title: D  
Name: STUART, JACK (BARBARA)  
Address: 10253 BRIARCLIFF RD E  
City-St-Zip: JACKSONVILLE, FL 32218

Title: D  
Name: SMITH, BERTHA  
Address: 3215 N EAST AVE  
City-St-Zip: PANAMA CITY, FL 32405

Title: DV  
Name: WATSON, ROSEMARIE  
Address: 3927 NW 31ST TERR  
City-St-Zip: GAINESVILLE, FL 32605

Title: D  
Name: THIGPEN, MARY  
Address: 5571 SW 91ST TERRACE  
City-St-Zip: GAINESVILLE, FL 32608

Title: D  
Name: MASON, MICHAEL C  
Address: POST OFFICE BOX 1828  
City-St-Zip: SILVER SPRINGS, FL 34489

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: WALTER E MCLANAHAN

C

04/28/2011

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date