2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 05, 2012
Secretary of State

DOCUMENT# N09394

Entity Name: WINTER HAVEN LIONS EYESIGHT CONSERVATION FOUNDATION, INC.

Current Principal Place of Business:

820 AVENUE L, S.W.
WINTER HAVEN, FL 33880 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 9015
WINTER HAVEN, FL 338839015

New Mailing Address:

FEI Number: 59-2596897 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROLF, LELAND JR
1034 BILTMORE DRIVE
WINTER HAVEN, FL 33881 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: TD
Name: ROLF, LELAND S
Address: 1034 BILTMORE DRIVE
City-St-Zip: WINTER HAVEN, FL 33881

Title: PD
Name: LEWIS, SHARON
Address: 152 MILLER DRIVE
City-St-Zip: WINTER HAVEN, FL 33884

Title: D
Name: POITRAS, RAY
Address: 321 AVENUE B, NE
City-St-Zip: WINTER HAVEN, FL 33881

Title: D
Name: BISHOP, CHARLES
Address: 1502 BUCKEYE RD. N.E. #2
City-St-Zip: WINTER HAVEN, FL 33881

Title: D
Name: GREENFIELD, JIM
Address: 350 17TH STREET NE
City-St-Zip: WINTER HAVEN, FL 33881

Title: SD
Name: SIROIS, SUSAN
Address: 362 AVENUE K SE
City-St-Zip: WINTER HAVEN, FL 33880

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: LELAND S. ROLF TREA 01/05/2012

Electronic Signature of Signing Officer or Director Date