

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000944

FILED  
Jan 06, 2012  
Secretary of State

**Entity Name:** BROWARD COUNTY EYE FOUNDATION, INC.

**Current Principal Place of Business:**

C/O MCFATTER TECHNICAL MED.DEPT.  
6500 NOVA DRIVE  
DAVIE, FL 33317

**New Principal Place of Business:**

**Current Mailing Address:**

C/O MCFATTER TECHNICAL MED.DEPT.  
6500 NOVA DRIVE  
DAVIE, FL 33317

**New Mailing Address:**

**FEI Number:** 65-0622742

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

STRUMSKI, MARGARET A OD  
2640 MCKINLEY ST.  
HOLLYWOOD, FL 33020 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: D  
Name: SICOIA, CRISTINA OD  
Address: 5542 S FLAMINGO RD  
City-St-Zip: COOPER CITY, FL 33330

Title: TD  
Name: STRUMSKI, MARGARET A OD  
Address: 2640 MCKINLEY ST.  
City-St-Zip: HOLLYWOOD, FL 33020

Title: S  
Name: BRAUSS, SANDRA LDO  
Address: 2301 WILTON DR., UNIT C  
City-St-Zip: WILTON MANORS, FL 33305

Title: D  
Name: BRAUSS, JAMES R OD  
Address: 2301 WILTON DR., UNIT C  
City-St-Zip: WILTON MANORS, FL 33305

Title: V  
Name: APAT, STEPHEN LDO  
Address: 9677-8 BOCA GARDEN CIRCLE N  
City-St-Zip: BOCA RATON, FL 33496

Title: P  
Name: MARTINEZ, RICHARD  
Address: 6500 NOVA DR  
City-St-Zip: DAVIE, FL 33317

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: MARGARET A STRUMSKI OD

T

01/06/2012

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date