2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 702966

Entity Name: FLORIDA LIONS EYE BANK, INC.

Current Principal Place of Business:

900 NW 17TH STREET

#348

MIAMI, FL 33136

Current Mailing Address:

900 NW 17TH STREET

#348

MIAMI, FL 33136 US

FEI Number: 59-0967012 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FOUT-CARAZA, ELIZABETH 900 N.W. 17 STREET FLORIDA LIONS EYE BANK MIAMI, FL 33136 US

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: ELIZABETH FOUT-CARAZA 05/15/2018

Electronic Signature of Registered Agent Date

Officer/Director Detail:

City-State-Zip:

Title PRESIDENT Title EXECUTIVE DIRECTOR

Name LETAKIS, GEORGE Name FOUT-CARAZA, ELIZABETH

Address 900 NW 17TH STREET Address 900 NW 17TH STREET

City-State-Zip: MIAMI FL 33136 #348

City-State-Zip: MIAMI FL 33136

Title IMMEDIATE PAST PRESIDENT

Title IMMEDIATE PAST PRESIDENT
Title VP
Name SCHIFF, LARRY

Name ENGSTROM, KENNETH

Address 900 NW 17TH STREET #347 Address 900 NW 17TH STREET

MIAMI FL 33136 #348

City-State-Zip: MIAMI FL 33136

Title VP Title TREASURER

Name WADE, GEOFF
Name OLARTE, LUIS
Address 900 NW 17TH STREET

#348 Address 900 NW 17TH STREET

City-State-Zip: MIAMI FL 33136 City-State-Zip: MIAMI FL 33136

Title SECRETARY Title VP

NameARTHUR, WILLIAMNameCALLAHAN, NORMA PHDAddress900 NW 17TH STREETAddress900 NW 17TH STREET

City-State-Zip: MIAMI FL 33136 City-State-Zip: MIAMI FL 33136

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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: ELIZABETH FOUT-CARAZA EXECUTIVE DIRECTOR 05/15/2018

Electronic Signature of Signing Officer/Director Detail

Date

FILED May 15, 2018

Secretary of State

CC7092901582

Officer/Director Detail Continued:

Title VP

Name SKUFE, JERRY

Address 900 NW 17TH STREET

City-State-Zip: MIAMI FL 33136