2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 727856

Entity Name: FLORIDA LIONS CONKLIN CENTERS FOR THE BLIND, INC.

FILED
Jan 18, 2018
Secretary of State
CC4908580471

Date

01/18/2018

Date

Current Principal Place of Business:

405 WHITE STREET

DAYTONA BEACH, FL 32114-2925

Current Mailing Address:

405 WHITE STREET

DAYTONA BEACH, FL 32114-2925

FEI Number: 23-7377066 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

KELLY, ROBERT T 405 WHITE STREET DAYTONA BEACH, FL 32114 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: ROBERT T. KELLY 01/18/2018

Electronic Signature of Registered Agent

Officer/Director Detail:

TitlePAST PRESIDENTTitleEXECUTIVE DIRECTORNamePEZZO, MARY TNameKELLY, ROBERT TAddressP.O.BOX 397Address405 WHITE STREET

City-State-Zip: TANGERINE FL 32777 City-State-Zip: DAYTONA BEACH FL 32114

TitlePRESIDENTTitleSECRETARYNameMOOS, ANDREWNameYOCHUM, MARYAddress3014 W. HORATIO STREETAddressP.O.BOX 2884

City-State-Zip: TAMPA FL 33609 City-State-Zip: ORMOND BEACH FL 32175

Title TREASURER Title DIRECTOR

Name CHAIKIN, ELIAS E Name ANDREWS, MARK

Address 13965 W. GRANADA BLVD Address 825 BALLOUGH ROAD SUITE 420 City-State-Zip: ORMOND BEACH FL 32174 City-State-Zip: DAYTONA BEACH FL 32114

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: ROBERT T KELLY EXECUTIVE DIRECTOR