

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 727856

FILED
Jan 08, 2014
Secretary of State
CC7652635212

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

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

01/08/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name HIGHTOWER, ROBERT
Address 13060 E. HWY 25
City-State-Zip: OCKLAWA FL 33979

Title 1ST VICE PRESIDENT
Name PEZZO, MARY T
Address P.O.BOX 397
City-State-Zip: TANGERINE FL 32777

Title TREASURER
Name RON, MELVIN
Address 40 WYNNFIELD DRIVE
City-State-Zip: PALM COAST FL 32164

Title PD
Name RESPESS, ROBERT D
Address P.O.BOX 1439
City-State-Zip: NEWBERRY FL 32669

Title SECRETARY
Name HALL, AUDREY
Address 11179 SW 71ST TERRACE ROAD
City-State-Zip: Ocala FL 34476

Title EXECUTIVE DIRECTOR
Name KELLY, ROBERT T
Address 405 WHITE STREET
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 HIGHTOWER

PRESIDENT

01/08/2014

Electronic Signature of Signing Officer/Director Detail

Date