2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2020
Secretary of State
0950641109CC

DOCUMENT# 741612

Entity Name: LIGHTHOUSE FOR THE BLIND OF THE PALM BEACHES, INC.

Current Principal Place of Business:

1710 E. TIFFANY DR
FIRST FLOOR
WEST PALM BEACH, FL 33407

Current Mailing Address:

1715 E. TIFFANY DR.
WEST PALM BEACH, FL 33407

FEI Number: 59-6008622

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KENNEDY, KEITH
1715 E. TIFFANY DR
LIGHTHOUSE FOR THE BLIND OF THE PALM BEACH
WEST PALM BEACH, FL 33407 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: KEITH KENNEDY 03/24/2020

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	PRESIDENT
Name	KENNEDY, KEITH
Address	1715 E. TIFFANY DR
City-State-Zip:	WEST PALM BEACH FL 33407

Title	CHAIRMAN
Name	MICKENS, DONTE
Address	4635 DANSON WAY
City-State-Zip:	DELRAY BEACH FL 33445

Title	DIRECTOR
Name	MORRIS, ARTHUR
Address	2785 HANCOCK CREEK ROAD
City-State-Zip:	WEST PALM BEACH FL 33411

Title	DIRECTOR
Name	MASSOUMI, ROSHAN
Address	PO BOX 2585
City-State-Zip:	PALM BEACH FL 33480

Title	DIRECTOR
Name	PRESTON, ALLEN
Address	82 KINGWOOD EAST
City-State-Zip:	WEST PALM BEACH FL 33417

Title	DIRECTOR
Name	MCLENDON, JOYCE
Address	300 S OCEAN BLVD 5A
City-State-Zip:	PALM BEACH FL 33480

Title	DIRECTOR
Name	ZIPERN, MARTIN S
Address	5080 N OCEAN DRIVE SUITE 15B
City-State-Zip:	SINGER ISLAND FL 33404

Title	DIRECTOR
Name	DOWNS, CHRIS
Address	9513 SE COVE POINT STREET
City-State-Zip:	TEQUESTA FL 33469

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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: KAREN DAVIDSON CFO 03/24/2020

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	GREGORY, ROBERT H III
Address	729 TRADEWIND DRIVE
City-State-Zip:	NORTH PALM BEACH FL 33408

Title	DIRECTOR
Name	MITCHELL, CARMENCITA
Address	325 EXECUTIVE WAY APT A204
City-State-Zip:	WEST PALM BEACH FL 33401

Title	CFO
Name	DAVIDSON, KAREN
Address	1715 TIFFANY DRIVE E
City-State-Zip:	WEST PALM BEACH FL 33407

Title	DIRECTOR
Name	CANO, DAVID
Address	9316 NUGENT TRAIL
City-State-Zip:	WEST PALM BEACH FL 33411

Title	DIRECTOR
Name	MOHAJER, MARYAM
Address	4610 PGA BLVD APT 206
City-State-Zip:	PALM BEACH GARDENS FL 33418