2023 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jun 19, 2023
Secretary of State
0921324172CC

DOCUMENT# 741612

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

Current Principal Place of Business:

5601 CORPORATE WAY, SUITE #210
WEST PALM BEACH, FL 33407

Current Mailing Address:

5601 CORPORATE WAY, SUITE #210
WEST PALM BEACH, FL 33407 US

FEI Number: 59-6008622

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GREGORY, III, ROBERT H. MR.
5601 CORPORATE WAY, SUITE #210
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: ROBERT H. GREGORY, III 06/19/2023

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

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

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

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

Title	EXECUTIVE DIRECTOR
Name	SHERMETT, TERRI
Address	5601 CORPORATE WAY, SUITE #210
City-State-Zip:	WEST PALM BEACH FL 33407

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

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

Title	DIRECTOR
Name	MOHAJER, MARYAM
Address	3406 WATERLILY CT. APT 209
City-State-Zip:	PALM BEACH GARDENS FL 33410

Title	DIRECTOR
Name	CLAWSON, KIMBERLY
Address	1200 MARINE WAY 301B
City-State-Zip:	NORTH PALM BEACH FL 33408

Continues on page 2

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: TERRI SHERMETT EXECUTIVE DIRECTOR 06/19/2023

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	PRESTON, ALLEN
Address	405 GREENBRIER B
City-State-Zip:	WEST PALM BEACH FL 33417

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

Title	DIRECTOR
Name	HOFFMAN, SONDRA
Address	2000 PRESIDENTIAL WAY 1601
City-State-Zip:	WEST PALM BEACH FL 33401

Title	SECRETARY
Name	SAFFOLD, TEKESHA
Address	1309 AVENUE G
City-State-Zip:	RIVIERA BEACH FL 33404

Title	DIRECTOR
Name	LINDEN, JOHN
Address	568 N REDWOOD DRIVE
City-State-Zip:	LAKE PARK FL 33403

Title	DIRECTOR
Name	STELLA, LISA
Address	846 S. CLEARY ROAD
City-State-Zip:	WEST PALM BEACH FL 33413