

**2024 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL
REPORT**

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: Yes

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

05/13/2024

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 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

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

Title VC
Name MITCHELL, CARMENCITA
Address 931 VILLAGE BLVD.
#905-345
City-State-Zip: WEST PALM BEACH FL 33409

Title EXECUTIVE DIRECTOR
Name STELLA, LISA M.
Address 5601 CORPORATE WAY, SUITE #210
City-State-Zip: WEST PALM BEACH FL 33407

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

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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: LISA STELLA

EXECUTIVE DIRECTOR

05/13/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

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

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

Title DIRECTOR
Name EDENS, M.D., STEVEN
Address 2602 PEPPERWOOD CIRCLE
City-State-Zip: NORTH PALM BEACH FL 33410

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

Title DIRECTOR
Name RADIN, RANDI
Address 7601 EDISTO DRIVE
City-State-Zip: LAKE WORTH FL 33467