

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 767762

Entity Name: MARION OAKS VOLUNTEER EYES, INCORPORATED**Current Principal Place of Business:**294 MARION OAKS LANE
MARION OAKS COMMUNITY CENTER
OCALA, FL 34473**Current Mailing Address:**294 MARION OAKS LANE
MARION OAKS COMMUNITY CENTER
OCALA, FL 34473 US**FEI Number:** 59-2348068**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**TIDWELL, MARGIE
294 MARION OAKS LANE
MARION OAKS COMMUNITY CENTER
OCALA, FL 34473 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:** MARGIE TIDWELL

06/18/2013

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	SECRETARY
Name	RAMSEY, FARIDA
Address	294 MARION OAKS LANE MARION OAKS COMMUNITY CENTER

City-State-Zip: Ocala FL 34473

Title	TREASURER
Name	TIDWELL, MARGIE
Address	294 MARION OAKS LANE MARION OAKS COMMUNITY CENTER

City-State-Zip: Ocala FL 34473

Title	INSTRUCTOR
Name	BARNES, BILLIE
Address	294 MARION OAKS LANE MARION OAKS COMMUNITY CENTER

City-State-Zip: Ocala FL 34473

Title	VICE-PRESIDENT
Name	DURAN, JORGE
Address	294 MARION OAKS LANE MARION OAKS COMMUNITY CENTER

City-State-Zip: Ocala FL 34473

Title	PRESIDENT
Name	CHRISTOPHER, ALFRED
Address	294 MARION OAKS LANE MARION OAKS COMMUNITY CENTER

City-State-Zip: Ocala FL 34473

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: MARGIE TIDWELL

TREASURER

06/18/2013

Electronic Signature of Signing Officer/Director Detail

Date