2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004764

Entity Name: NORTH FLORIDA LIONS EYE FOUNDATION, INC.

FILED Apr 29, 2019 **Secretary of State** 9832902263CC

Current Principal Place of Business:

C/O ANTHONY ESPOSITO - ARLINGTON LIONS CLUB 6523 COMMERCE STREET JACKSONVILLE, FL 32211

Current Mailing Address:

C/O ANTHONY ESPOSITO 6161 ARLINGTON EXPRESSWAY JACKSONVILLE, FL 32211 US

FEI Number: 83-0432246 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ESPOSITO, ANTHONY 4480 DEERWOD LAKE PKWY **UNIT 636** JACKSONVILLE, FL 32216 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: ANTHONY ESPOSITO

04/29/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Chicoly Bill Cotton Bottain .			
Title	DIRECTOR	Title	DIRECTOR
Name	SMITH, BERTHA	Name	SCHULER, SHIRLEY
Address	3215 N EAST AVE	Address	29 SE 48TH ST
City-State-Zip:	PANAMA CITY FL 32405	City-State-Zip:	GAINESVILLE FL 32641
			DIDECTOR
Title	DIRECTOR, PRESIDENT	Title	DIRECTOR
Name	RICHARDS, RICHARD W	Name	GOLDEN, THOMAS
Address	1672 EL CAMINO RD APT 3	Address	1203 TARPON LANE
		City-State-Zip:	LADY LAKE FL 32159
City-State-Zip:	JACKSONVILLE FL 32216	- 7 - 2000 - 1	

Title DIRECTOR, TREASURER Title DIRECTOR, SECRETARY **ESPOSITO. ANTHONY** Name STRICKLAND JR, HORACE B Name

Address 4480 DEERWOOD LAKE PKWY UNIT 3422 SARA DR Address

City-State-Zip: JACKSONVILLE FL 32216 JACKSONVILLE FL 322772527 City-State-Zip:

Title **DIRECTOR** Title **DIRECTOR** GREER, ANN Name CLARK, ESTELLE Name

Address 1291 ST ANDREWS DR 9335 SW 85TH ST UNIT E Address ROCKLEDGE FL 32955 City-State-Zip: City-State-Zip: OCALA FL 34481

SIGNATURE: ANTHONY ESPOSITO

TREASURER

04/29/2019

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.