

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N18000012519

**Entity Name:** SOCIETY FOR NEUROSPTS INC.

**Current Principal Place of Business:**

2965 AZALEA DR  
COOPER CITY, FL 33026

**Current Mailing Address:**

2965 AZALEA DR  
COOPER CITY, FL 33026 US

**FEI Number:** 83-2693962

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

UNITED STATES CORPORATION AGENTS, INC  
5575 S. SEMORAN BLVD  
SUITE 36  
ORLANDO, FL 32822 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name TARTAR, JAIME LEE  
Address 2965 AZALEA DR  
City-State-Zip: COOPER CITY FL 33026

Title TD  
Name ANTONIO, JOSE  
Address 2965 AZALEA DR  
City-State-Zip: COOPER CITY FL 33026

Title SD  
Name PEACOCK, COREY ALLEN  
Address 2965 AZALEA DR  
City-State-Zip: COOPER CITY FL 33026

*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:** JAIME TARTAR

PD

02/28/2022

Electronic Signature of Signing Officer/Director Detail

Date