

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005261

Entity Name: DISTRICT 35-0 LIONS PROJECT RIGHT TO SIGHT, INC.**Current Principal Place of Business:**108 TAYLOR STREET
STE D
OCOE, FL 34761-2620**Current Mailing Address:**P.O. BOX 538
OCOE, FL 34761 US**FEI Number:** 59-3283656**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JAMES, GARY S
108 TAYLOR STREET
STE D
OCOE, FL 34761-2620 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:** GARY S. JAMES

04/20/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name OCHOA, JULIO S
Address P.O. BOX 538
City-State-Zip: OCOE FL 34761

Title VP
Name WILSEN, FRED
Address P.O. BOX 538
City-State-Zip: OCOE FL 34761

Title DIRECTOR
Name ANDERSON, MARILYN
Address P.O. BOX 538
City-State-Zip: OCOE FL 34761

Title PAST PRESIDENT
Name ERION, THEODORE (TED) L
Address P.O. BOX 538
City-State-Zip: OCOE FL 34761

Title SECRETARY
Name JAMES, LINDA
Address P.O. BOX 538
City-State-Zip: OCOE FL 34761

Title DIRECTOR
Name JAMES, GARY S
Address P.O. BOX 538
City-State-Zip: OCOE FL 34761

Title DIRECTOR
Name GIEDD, O.D.,M.S., KERRY
Address P.O. BOX 538
City-State-Zip: OCOE FL 34761

Title DIRECTOR
Name KOERTNER, L.D.O., JIM
Address P.O. BOX 538
City-State-Zip: OCOE FL 34761

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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: JOE LANGELLO**TREASURER**

04/20/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name FAWCETT, RITA
Address P.O. BOX 538
City-State-Zip: OCOEE FL 34761

Title DIRECTOR
Name RAMCHANDLER, M.D., ETHIRAJ
Address P.O. BOX 538
City-State-Zip: OCOEE FL 34761

Title T
Name LANGELO, JOE
Address P.O. BOX 538
City-State-Zip: OCOEE FL 34761

Title DIRECTOR
Name RICHARDSON, O.D., FRANCISCO
Address P.O. BOX 538
City-State-Zip: OCOEE FL 34761

Title DIRECTER
Name ANNIS, DAN
Address P.O. BOX 538
City-State-Zip: OCOEE FL 34761