

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED

DOCUMENT# N96000003595

Jan 25, 2019

Entity Name: VISION IS PRICELESS COUNCIL, INC.

Secretary of State

0516680529CC

Current Principal Place of Business:

3 SHIRCLIFF WAY SUITE 546
JACKSONVILLE, FL 32204

Current Mailing Address:

3 SHIRCLIFF WAY SUITE 546
JACKSONVILLE, FL 32204 US

FEI Number: 59-3386495

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BUEKER, JAMI G
3 SHIRCLIFF WAY SUITE 546
JACKSONVILLE, FL 32204 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 BOARD MEMBER
Name LEVENSON, JEFFREY H DR.
Address 751 OAK STREET
SUITE 200
City-State-Zip: JACKSONVILLE FL 32204

Title CHAIRMAN ELECT
Name BROWN, O.D., JEFFREY D. DR.
Address 100 W. BAY STREET
City-State-Zip: JACKSONVILLE FL 32202

Title CHAIRMAN
Name EFFNER, GREGG
Address 1181 MILL CREEK DRIVE
City-State-Zip: SAINT JOHNS FL 32259

Title BOARD MEMBER
Name SCHWAM, M.D, BRIAN L. DR.
Address 7500 CENTURION PKWY
SUITE 100
City-State-Zip: JACKSONVILLE FL 32256

Title IMMEDIATE PAST CHAIRMAN
Name WITT, JR., EDWARD E.
Address P.O. BOX 1799
City-State-Zip: JACKSONVILLE FL 32201

Title BOARD MEMBER
Name SHETTY, RAJESH K DR.
Address 11512 LAKE MEAD AVENUE,
SUITE 534
City-State-Zip: JACKSONVILLE FL 32256

Title BOARD MEMBER
Name MANIER, SUSAN
Address 11825 CENTRAL PARKWAY
City-State-Zip: JACKSONVILLE FL 32224

Title TREASURER
Name MCINTOSH, LISA
Address 1 INDEPENDENT DRIVE
9TH FLOOR
City-State-Zip: JACKSONVILLE FL 32202

Continues on page 2

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: JAMI BUEKER

EXECUTIVE DIRECTOR

01/25/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title EXECUTIVE DIRECTOR
Name BUEKER, JAMI GAFF
Address 3 SHIRCLIFF WAY SUITE 546
City-State-Zip: JACKSONVILLE FL 32204

Title BOARD MEMBER
Name VERDUCCI, ADAM
Address 4190 BELFORT RD., STE 305
City-State-Zip: JACKSONVILLE FL 32216

Title BOARD MEMBER
Name MONAHAN, SUSAN OD, FAAO
Address 408 PONTE VEDRA BLVD
City-State-Zip: PONTE VEDRA BEACH FL 32082

Title BOARD MEMBER
Name UNKRICH, KELLY MD
Address 807 CHILDREN'S WAY
City-State-Zip: JACKSONVILLE FL 32207

Title SECRETARY
Name BIDES, PAULA
Address 4201 BELFORT RD
City-State-Zip: JACKSONVILLE FL 32216

Title BOARD MEMBER
Name TREADWAY, JOSH
Address 2263 CLOVELLY LANE
City-State-Zip: ST AUGUSTINE FL 32092

Title BOARD MEMBER
Name PATEL, ANITHA MD
Address 8031 PEBBLE CREEK LANE WEST
City-State-Zip: PONTE VEDRA BEACH FL 32082

Title BOARD MEMBER
Name BLACK, CHRIS
Address 6018 BOWDENDALE AVE
SUITE 546
City-State-Zip: JACKSONVILLE FL 32216