2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9600003595

Entity Name: VISION IS PRICELESS COUNCIL, INC.

Current Principal Place of Business:

3 SHIRCLIFF WAY SUITE 546 JACKSONVILLE, FL 32204

Current Mailing Address:

3 SHIRCLIFF WAY SUITE 546 JACKSONVILLE, FL 32204

FEI Number: 59-3386495

Name and Address of Current Registered Agent:

MATTOX, SUSAN F 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

Officer/Director Detail :

| | Officer/Director Detail : | | | | | | | |
|--|---------------------------|-----------------------------------|---|---------------------------------|--|--|--|--|
| | Title | BOARD MEMBER | Title | CHAIRMAN | | | | |
| | Name | TREECE, THOMAS D | Name | GIBSON, ROGER G | | | | |
| | Address | 4465 BAYMEADOWS ROAD SUITE 2 | Address | 751 OAK STREET SUITE 100 | | | | |
| | City-State-Zip: | JACKSONVILLE FL 32217 | City-State-Zip: | JACKSONVILLE FL 32204 | | | | |
| | Title | BOARD MEMBER | Title | BOARD MEMBER | | | | |
| | Name | KNAUER, III, M.D., WILLIAM J. DR. | Name | MCGEE, M.D., TERRENCE DR. | | | | |
| | Address | 2535 RIVERSIDE AVENUE | Address | 2080 CHILD STREET SUITE 5404 | | | | |
| | City-State-Zip: | JACKSONVILLE FL 32204 | City-State-Zip: | JACKSONVILLE FL 32214 | | | | |
| | Title | SECRETARY | Title Name Address City-State-Zip: | MEDICAL DIRECTOR | | | | |
| | Name | DUSS, DAWN N DR. | | LEVENSON, JEFFREY H DR. | | | | |
| | Address | P O BOX 5720 | | 9453 KELLS RD | | | | |
| | City-State-Zip: | JACKSONVILLE FL 32207 | | JACKSONVILLE FL 32257 | | | | |
| | Title | EXECUTIVE DIRECTOR | Title | BOARD MEMBER | | | | |
| | Name | MATTOX, SUSAN F | Name | BETCHKAL, M.D., JANET A. DR. | | | | |
| | Address | 3 SHIRCLIFF WAY SUITE 546 | Address | 3 SHIRCLIFF WAY SUITE 134 | | | | |
| | City-State-Zip: | JACKSONVILLE FL 32204 | City-State-Zip: | JACKSONVILLE FL 32204 | | | | |
| | | | | | | | | |

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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: SUSAN F. MATTOX

EXECUTIVE DIRECTOR 03/17/2014

Electronic Signature of Signing Officer/Director Detail

FILED Mar 17, 2014 Secretary of State CC4490846545

Certificate of Status Desired: No

Date

Date

Officer/Director Detail Continued :

| | Title | BOARD MEMBER | Title | BOARD MEMBER |
|--|-----------------|---------------------------------|-----------------|-----------------------------------|
| | Name | BROWN, O.D., JEFFREY D. DR. | Name | DAVALT, PATRICIA B. |
| | Address | 100 W. BAY STREET | Address | 807 LOMAX STREET |
| | City-State-Zip: | JACKSONVILLE FL 32202 | City-State-Zip: | JACKSONVILLE FL 32204 |
| | Title | BOARD MEMBER | Title | BOARD MEMBER |
| | Name | DEVAUL, DIANA K, | Name | DUBEY , DHARMESH K. |
| | Address | 2300 PINE NEEDLE COURT | Address | 7500 CENTURION PKWY |
| | City-State-Zip: | FLEMING ISLAND FL 32003 | | SUITE 100 |
| | Ony Otale Zip. | | City-State-Zip: | JACKSONVILLE FL 32256 |
| | Title | BOARD MEMBER | Title | BOARD MEMBER |
| | Name | EFFNER, GREGG | Name | MARTIN, ANTHONY W. |
| | Address | 4601 TOUCHTON RD. EAST # 300 | Address | 7500 CENTURION PKWY SUITE 100 |
| | City-State-Zip: | JACKSONVILLE FL 32259 | City-State-Zip: | JACKSONVILLE FL 32256 |
| | Title | BOARD MEMBER | Title | BOARD MEMBER |
| | Name | MEYER, DAVID | Name | MOODY, O.D., F.A.A.O, KURT J. DR. |
| | Address | 2 SHIRCLIFF WAY SUITE 615 | Address | 7500 CENTURION PKWY SUITE 100 |
| | City-State-Zip: | JACKSONVILLE FL 32204 | City-State-Zip: | JACKSONVILLE FL 32256 |
| | Title | BOARD MEMBER | Title Name | BOARD MEMBER |
| | Name | ROBERTS, RONALD L. | | SCHWAM, M.D, BRIAN L. DR. |
| | Address | 2251 ROSELLE STREET | Address | 7500 CENTURION PKWY SUITE 100 |
| | City-State-Zip: | JACKSONVILLE FL 32204 | | |
| | Title | BOARD MEMBER | City-State-Zip: | JACKSONVILLE FL 32256 |
| | Name | THORNTON, M.D., RANDOLPH E. DR. | Title | BOARD MEMBER |
| | Address | 2606 PARK STREET | Name | WIGGINS, DONALD C. |
| | City-State-Zip: | JACKSONVILLE FL 32204 | Address | 4811 BEACH BLVD. SUITE 300 |
| | Title | BOARD MEMBER | City-State-Zip: | JACKSONVILLE FL 32207 |
| | Name | WITT, JR., EDWARD E. | | |
| | Address | P.O. BOX 1799 | | |
| | City State Zin: | | | |

City-State-Zip: JACKSONVILLE FL 32201