2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003595

Entity Name: VISION IS PRICELESS COUNCIL, INC.

FILED Mar 30, 2020 Secretary of State 9382500773CC

Current Principal Place of Business:

4615 PHILIPS HWY SUITE 100A JACKSONVILLE, FL 32207

Current Mailing Address:

4615 PHILIPS HWY SUITE 100A JACKSONVILLE, FL 32207 US

FEI Number: 59-3386495 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BUEKER, JAMI G 4615 PHILIPS HWY SUITE 100A JACKSONVILLE, FL 32207 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:

City-State-Zip:

City-State-Zip:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title **BOARD MEMBER** Title CHAIRMAN

LEVENSON, JEFFREY H DR. Name Name BROWN, O.D., JEFFREY D. DR.

Address 751 OAK STREET Address 5255 DUNN AVE

SUITE 200

JACKSONVILLE FL 32204

BOARD MEMBER Title

Title IMMEDIATE PAST CHAIRMAN Name

SCHWAM, M.D, BRIAN L. DR. Name EFFNER, GREGG Address 7500 CENTURION PKWY

1181 MILL CREEK DRIVE Address SUITE 100

City-State-Zip: JACKSONVILLE FL 32256 SAINT JOHNS FL 32259 City-State-Zip:

Title **BOARD MEMBER** Title **BOARD MEMBER** Name HASAN, S. AKBAR DR. WITT, JR., EDWARD E. Name

Address 11512 LAKE MEAD AVENUE, P.O. BOX 1799 Address

SUITE 534 JACKSONVILLE FL 32201

City-State-Zip: JACKSONVILLE FL 32256

Title **BOARD MEMBER** Title **BOARD MEMBER** Name MANIER, SUSAN Name MCINTOSH, LISA

Address 11825 CENTRAL PARKWAY Address 1 INDEPENDENT DRIVE

City-State-Zip: JACKSONVILLE FL 32224 9TH FLOOR

City-State-Zip: JACKSONVILLE FL 32202

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City-State-Zip:

JACKSONVILLE FL 32218

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.

03/30/2020 EXECUTIVE DIRECTOR SIGNATURE: JAMI BUEKER

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

 Title
 EXECUTIVE DIRECTOR
 Title
 CHAIRMAN ELECT

 Name
 BUEKER, JAMI GAFF
 Name
 BIDES, PAULA

Address 4615 PHILIPS HWY SUITE 100A Address 4201 BELFORT RD

City-State-Zip: JACKSONVILLE FL 32207 City-State-Zip: JACKSONVILLE FL 32216

Title **BOARD MEMBER** Title **TREASURER** Name TREADWAY, JOSH Name VERDUCCI, ADAM Address 2263 CLOVELLY LANE Address 4190 BELFORT RD., STE 305 City-State-Zip: ST AUGUSTINE FL 32092 City-State-Zip: JACKSONVILLE FL 32216

Title SECRETARY Title BOARD MEMBER

Name MONAHAN, SUSAN OD, FAAO Name UNKRICH, KELLY MD

Address 408 PONTE VEDRA BLVD Address 807 CHILDREN'S WAY

City-State-Zip: PONTE VEDRA BEACH FL 32082 City-State-Zip: JACKSONVILLE FL 32207

Title BOARD MEMBER Title BOARD MEMBER
Name BLACK, CHRIS Name SCOTT, MEGAN N DR.

Address 6018 BOWDENDALE AVE Address 151 SAWGRASS CORNERS DR,

SUITE 546 SUITE 208

City-State-Zip: JACKSONVILLE FL 32216 City-State-Zip: PONTE VEDRA BEACH FL 32082

TitleBOARD MEMBERTitleBOARD MEMBERNameRILEY, PATRICKNameBRADLEY, TONIA

Address 7865 COLLINS GROVE ROAD Address 700 BARRINGTON DRIVE

City-State-Zip: JACKSONVILLE FL 32256 City-State-Zip: FERNANDINA BEACH FL 32034