

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003595

Entity Name: VISION IS PRICELESS COUNCIL, INC.

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:

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 BOARD MEMBER
Name BROWN, O.D., JEFFREY D. DR.
Address 5255 DUNN AVE
City-State-Zip: JACKSONVILLE FL 32218

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

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

Title CHAIRMAN ELECT
Name HASAN, S. AKBAR DR.
Address 11512 LAKE MEAD AVENUE,
SUITE 534
City-State-Zip: JACKSONVILLE FL 32256

Title EXECUTIVE DIRECTOR
Name BUEKER, JAMI GAFF
Address 4615 PHILIPS HWY SUITE 100A
City-State-Zip: JACKSONVILLE FL 32207

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

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

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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: JAMI BUEKER

EXECUTIVE DIRECTOR

03/31/2022

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

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

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

Title BOARD MEMBER
Name SCOTT, MEGAN N DR.
Address 151 SAWGRASS CORNERS DR, SUITE 208
City-State-Zip: PONTE VEDRA BEACH FL 32082

Title BOARD MEMBER
Name BRADLEY, TONIA
Address 700 BARRINGTON DRIVE
City-State-Zip: FERNANDINA BEACH FL 32034

Title BOARD MEMBER
Name LAMELL, PATRICIA
Address 3650 HOLLY GROVE AVENUE
City-State-Zip: JACKSONVILLE FL 32217

Title BOARD MEMBER
Name DUSS, DAWN MD
Address 245 RIVERSIDE AVE
City-State-Zip: JACKSONVILLE FL 32202

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

Title SECRETARY
Name RILEY, PATRICK
Address 7865 COLLINS GROVE ROAD
City-State-Zip: JACKSONVILLE FL 32256

Title TREASURER
Name KIRK, JAMES TYLER
Address 3898 JEAN ST
City-State-Zip: JACKSONVILLE FL 32205

Title BOARD MEMBER
Name WILLIAMS, VONTRECE
Address 25 N MARKET STREET
City-State-Zip: JACKSONVILLE FL 32202