2021 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F0400003159

Entity Name: THE SEEING EYE, INC.

Current Principal Place of Business:

1 SEEING EYE WAY MORRISTOWN, NJ 07960

Current Mailing Address:

P.O. BOX 375 MORRISTOWN, NJ 07963-0375 US

FEI Number: 22-1539721

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 US

Date

Certificate of Status Desired: Yes

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 :

Title	C	Title	VC
Name	DUFFY, THOMAS J	Name	HOWARD, MARGARET E
Address	P.O. BOX 375	Address	P.O. BOX 375
City-State-Zip:	MORRISTOWN NJ 07963-0375	City-State-Zip:	MORRISTOWN NJ 07963-0375
Title	VC	Title	Р
Name	BENACERRAF, ARI	Name	HOAGLAND, GLENN D
Name	DENAGERRAF, ARI	Name	HOAGEAND, GEENN D
Address	P.O. BOX 375	Address	P.O. BOX 375
City-State-Zip:	MORRISTOWN NJ 07963-0375	City-State-Zip:	MORRISTOWN NJ 07963-0375
Title	AS	Title	AT
THE	A3		
Name	JOHNSON, DAVID H.	Name	PUDLAK, ROBERT
Address	P.O. BOX 375	Address	P.O. BOX 375
City-State-Zip:	MORRISTOWN NJ 07963-0375	City-State-Zip:	MORRISTOWN NJ 07963-0375
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Title	SECRETARY	Title	TREASURER
Title Name	SECRETARY BRYANT, CYNTHIA	Title Name	TREASURER KWON, OHSANG
Name	BRYANT, CYNTHIA P.O. BOX 375	Name	KWON, OHSANG

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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: ROBERT PUDLAK

ASSISTANT TREASURER 03/12/2021

Electronic Signature of Signing Officer/Director Detail

Officer/Director Detail Continued :

Title	ASST. SECRETARY	
Name	LIEBERMAN, JENNIFER	
Address	P.O. BOX 375	
City-State-Zip:	MORRISTOWN NJ 07963-0375	