

2024 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000003159

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

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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 PRESIDENT
Name HOWARD, MARGARET E
Address P.O. BOX 375
City-State-Zip: MORRISTOWN NJ 07963-0375

Title C
Name BRYANT, CYNTHIA
Address P.O. BOX 375
City-State-Zip: MORRISTOWN NJ 07963-0375

Title VC
Name HERTZ, DAVID
Address P.O. BOX 375
City-State-Zip: MORRISTOWN NJ 07963-0375

Title AS
Name JOHNSON, DAVID H.
Address P.O. BOX 375
City-State-Zip: MORRISTOWN NJ 07963-0375

Title AT
Name HANDS, JAMES
Address P.O. BOX 375
City-State-Zip: MORRISTOWN NJ 07963-0375

Title VC
Name KIERNAN, CATHERINE
Address P.O. BOX 375
City-State-Zip: MORRISTOWN NJ 07963-0375

Title TREASURER
Name KWON, OHSANG
Address P.O. BOX 375
City-State-Zip: MORRISTOWN NJ 07963-0375

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

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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: JAMES HANDS

ASSISTANT TREASURER 04/26/2024

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date

Officer/Director Detail Continued :

Title S
Name MITTELMAN, MICHAEL
Address P.O. BOX 375
City-State-Zip: MORRISTOWN NJ 07963