

2013 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000003159

Entity Name: THE SEEING EYE, INC.**Current Principal Place of Business:**10 WASHINGTON VALLEY ROAD
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 C
Name CHAKRIN, LEWIS M
Address P.O. BOX 375
City-State-Zip: MORRISTOWN NJ 07963-0375

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

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

Title SECRETARY
Name CARROLL, JULIE H.
Address 10 WASHINGTON VALLEY ROAD
City-State-Zip: MORRISTOWN NJ 07960

Title VC
Name CRNKOVICH, PETER N
Address P.O. BOX 375
City-State-Zip: MORRISTOWN NJ 07963-0375

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

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

Title TREASURER
Name HAMWEE, ROBERT A
Address 10 WASHINGTON VALLEY ROAD
City-State-Zip: MORRISTOWN NJ 07960

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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 A. KUTSCH, JR.**PRESIDENT****04/18/2013**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	ASST. SECRETARY
Name	LIEBERMAN, JENNIFER
Address	10 WASHINGTON VALLEY ROAD
City-State-Zip:	MORRISTOWN NJ 07960