#### 2013 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000003495

Entity Name: AMERICAN OPTOMETRIC FOUNDATION, INC.

**FILED** Jan 11, 2013 **Secretary of State** CC4700823724

## **Current Principal Place of Business:**

2909 FAIRGREEN STREET ORLANDO, FL 32803

## **Current Mailing Address:**

2909 FAIRGREEN STREET ORLANDO, FL 32803

FEI Number: 43-0768182 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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	IMMEDIATE PAST PRESIDENT	Title	DIRECTOR

AMOS, CATHERINE DR Name Name KIRSCHEN, DAVID DR 2909 FAIRGREEN STREET 2909 FAIRGREEN STREET Address Address City-State-Zip: ORLANDO FL 32803 ORLANDO FL 32803 City-State-Zip:

Title D Title DIRECTOR

Name PURCELL, HOWARD DR BARR, JOSEPH DR Name Address 2909 FAIRGREEN STREET Address 2909 FAIRGREEN STREET ORLANDO FL 32803 City-State-Zip: City-State-Zip: ORLANDO FL 32803

Title D Name SCHOENBRUN, LOIS RILEY, COLLEEN DR Name Address 2909 FAIRGREEN STREET Address 2909 FAIRGREEN STREET

Title

ORLANDO FL 32803 City-State-Zip: ORLANDO FL 32803 City-State-Zip:

Title **TREASURER** Title DIRECTOR

KOLLBAUM, PETE DR. Name BALL, W. L. DR. Name 2909 FAIRGREEN STREET Address 2909 FAIRGREEN STREET Address

City-State-Zip: ORLANDO FL 32803 City-State-Zip: ORLANDO FL 32803

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EXECUTIVE DIRECTOR

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.

01/11/2013 SIGNATURE: LOIS SCHOENBRUN EXECUTIVE DIRECTOR

Electronic Signature of Signing Officer/Director Detail

Date

# Officer/Director Detail Continued:

Title PRESIDENT ELECT Title PRESIDENT

NameSHEEDY, JAMES DR.NameDUMBLETON, KATHY DR.Address2909 FAIRGREEN STREETAddress2909 FAIRGREEN STREET

City-State-Zip: ORLANDO FL 32803 City-State-Zip: ORLANDO FL 32803