

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 702966

FILED
May 05, 2008
Secretary of State

Entity Name: FLORIDA LIONS EYE BANK, INC.

Current Principal Place of Business:

900 NW 17TH ST
MIAMI, FL 33136 US

New Principal Place of Business:

900 NW 17TH ST
#347
MIAMI, FL 33136 US

Current Mailing Address:

131C
BOX 016880 (ZIP 33101)
MIAMI, FL 331016880 US

New Mailing Address:

900 NW 17TH ST
#347
MIAMI, FL 33136 US

FEI Number: 59-0967012 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

FOUT-CARAZA, ELIZABETH
900 N.W. 17 STREET
FLORIDA LIONS EYE BANK
MIAMI, FL 33136 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: VIDAL, RICHARD M
Address: 6895 PINEHURST DRIVE
City-St-Zip: MIAMI, FL 33015

Title: V () Delete
Name: HARE, GORDON
Address: 4873 REGAL DRIVE
City-St-Zip: BONITA SPRINGS, FL 34134

Title: V () Delete
Name: SWEENEY, WILLIAM
Address: 1401 E. ATLANTA BLVD. SUITE A
City-St-Zip: POMPANO BEACH, FL 33060

Title: V () Delete
Name: JONES, STACEY
Address: 19140 SW 22ND PLACE
City-St-Zip: MIAMI, FL 33056

Title: S () Delete
Name: ROSA, GALLIANI
Address: 4851 NW 99TH COURT
City-St-Zip: DORAL, FL 33178

Title: T () Delete
Name: FIGUERAS, LUIS
Address: 5151 COLLINS AVENUE APT#623
City-St-Zip: MIAMI, FL 33140

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SWEENEY, WILLIAM
Address: 1401 E. ATLANTA BLVD. SUITE A
City-St-Zip: POMPANO BEACH, FL 33060

Title: V (X) Change () Addition
Name: KLUG, JIM
Address: 4257 32 AVENUE SW
City-St-Zip: NAPLES, FL 34116

Title: V (X) Change () Addition
Name: BRAUSS, JAMES
Address: 1528 NE 4TH AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: GALLIANI, ROSA
Address: 4851 NW 99TH COURT
City-St-Zip: DORAL, FL 33178

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ELIZABETH FOUT-CARAZA

D

05/05/2008

Electronic Signature of Signing Officer or Director

Date