

FILED
Apr 27, 2000 8:00 am
Secretary of State
04-27-2000 90099 036 ***70.00

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1. The first step in the process is to identify the problem or issue that needs to be addressed. This involves gathering information and understanding the context of the problem.

2. Once the problem is identified, the next step is to define the objectives and goals of the project. This helps to clarify what needs to be achieved and provides a clear direction for the team.

3. The third step is to develop a plan or strategy to address the problem. This involves breaking down the problem into smaller, manageable tasks and determining the resources needed to complete them.

4. The fourth step is to implement the plan. This involves putting the strategy into action and monitoring progress regularly to ensure that the project is on track.

5. The final step is to evaluate the results of the project. This involves assessing the outcomes against the objectives and goals and identifying any areas for improvement.

DO NOT WRITE IN THIS SPACE

DOCUMENT # 706503

1. Entity Name

NATIONAL SOCIETY TO PREVENT BLINDNESS, FLORIDA A

Principal Place of Business

Mailing Address

3825 HENDERSON BLVD.
STE-402- 206
TAMPA FL 33629
US

3825 HENDERSON BLVD.
STE-402- 206
TAMPA FL 33629-5012
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

206

Suite, Apt. #, etc.

206

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-6181662

Applied For

Not Applicable

5. Certificate of Status Desired

XX

\$8.75 Additional Fee Required.

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JORDAN-HOLMES SARAH CFRE
3825 HENDERSON BLVD.
STE. 402
TAMPA FL 33629

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement of

nd office or registered agent, or both, in the state of Florida.

SIGNATURE

Signature, typed or printed name

title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MCGURN, LINDA C 101 S.E. 2ND PLACE, STE. 202 GAINESVILLE FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD Thomas M. Riedhammer, Ph.D 8500 Hidden River Pkwy Tampa, FL 33637	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MCNAMARA, PATRICK J 201 N. FRANKLIN ST., STE. 2300 TAMPA FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCD Harold J. Costello 201 E. Kennedy Blvd., Suite-1611 Tampa, FL 33602	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD PENDER, MICHAEL R JR. 4803 WINCHESTER DRIVE SARASOTA FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCD Michael R. Pender, Jr. 1605 Main Street, Suite 1100 Sarasota, FL 34236	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCD SALUD, VIOLETA B. 1 WEST CENTRAL AVE., STE 103 LAKE WALES FL	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCD Isabel Norton 1500 North Drive Sarasota, FL 34239	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO JORDON/HOLMES, SARAH 3825 HENDERSON BLVD., STE. 402 TAMPA FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCD-James M. Callahan 7500 Centurion Blvd. Jacksonville, FL 32256	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

4/13/2000

(813) 874-2020