## FILED Jul 23, 2007 8:00 am Secretary of State

2007 NOT	T-FOR-PROFIT CORPORA	ATION
	ANNUAL REPORT	

SIGNATURE:

DOCUMENT # 714355  1. Entity Name FLORIDA OPTOMETRIC ASSOCIATION CHARITIES, INC.							07-23-2007	90041 (	003 ****6	1.25	
Principal Place of Business 2958 WELLINGTON CIRCLE NORTH SUITE 200 TALLAHASSEE, FL 32309 US  Mailing Address 2958 WELLINGTON CIRCLE NORTH SUITE 200 TALLAHASSEE, FL 32309 US  Mailing Address 2958 WELLINGTON CIRCLE NORTH SUITE 200 TALLAHASSEE, FL 32309 US							IAN 8/88 800 800 60				
2. Principal Place of Business - No P.O. Box # 3.			3. Mailin	3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.				07022007	Chg-NP	CR2E0	37 (12/06)		
City & State		City & State			4. FEI Number 59-1261			<del></del>	oplied For ot Applicable		
Zip		Country	Zip		Соц	intry	5. Certificate of	of Status Desired		\$8.75 Add Fee Require	
	6. Name	and Address of Current F	Registered	Agent			7. Name and	Address of New R	egistered	Agent	
CARSON,	LEONADI	<b>.</b> Λ				Name					
	LINGTON	CIRCLE NORTH				Street Address (P.O. Box Number is Not Acceptable)					
TALLAHAS	SSEE, FL	32309									
						City			FL	Zip Cod	е
	named entiti ions of regist	y submits this statement for tered agent.	the purpos	se of changing its	registere	ed office or regis	stered agent, or both	n, in the State of Flo	orida. I am	familiar with,	and accept
SIGNATURE .	Signature, typed	or printed name of registered agent a	and title if applic	ab <del>le.</del> (NOTE	: Registere	J Agent signature requ	ured when reinstating)		DATE		
Filing Fee is \$61.25 Due by September 14, 2007			9. Election Campaign Financing Trust Fund Contribution.								
Di							\$5.00 May Be Added to Fees	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		k payable t rtment of S	
<b>D</b> :			ECTORS				Added to Fees	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ida Depa	rtment of S	tate
	SD	otember 14, 2007	ECTORS		ontributi	on. D	Added to Fees	Flor	ida Depa	rtment of S	tate
10.	SD KOSANO	OFFICERS AND DIR VICH, TAD O.D TH INDIANA AVE	ECTORS	Trust Fund C	11. THE NAMES STREET	on. D	Added to Fees	Flor	ida Depa	RECTORS IN	tate V 10
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ATTACHMENT H0126648

Directors of Florida Optometric Association Charities, Inc.

Title:

PD

Name:

Broome III, Frank, O.D.

Street Address:

2902 224th Street

City-State-Zip:

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Title:

**VD** 

Name:

Barker, Gary, O.D.

**Street Address:** 

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City-State-Zip:

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Title:

SD

Name:

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Street Address: City-State-Zip:

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Title:

TD

Name:

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Title:

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Title:

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Name:

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Title:

D

Name:

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Title:

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Street Address: City-State-Zip:

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Title:

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Name:

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