

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 716755

FILED
Jan 09, 2009
Secretary of State

Entity Name: LAUDERDALE BY THE SEA LIONS EYE FOUNDATION, INC.

Current Principal Place of Business:

4442 SEA GRADE DR.
LAUDERDALE BY THE SEA, FL 33308 US

New Principal Place of Business:

Current Mailing Address:

4442 SEA GRADE DR.
LAUDERDALE BY THE SEA, FL 33308 US

New Mailing Address:

FEI Number: 23-7036268 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SAN MIGUEL, MIKE
4442 SEAGRAPE DR.
LAUDERDALE BY THE SEA, FL 33308 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/D () Delete
Name: PEARSON,NELS,
Address: 3100 NE 49TH TERR
City-St-Zip: FT.LAUDERDALE, FL

Title: D () Delete
Name: SAN MIGUEL, MICHAEL,
Address: 4442 SEA GRAPE DR
City-St-Zip: LAUDERDALE BY SEA, FL

Title: D () Delete
Name: NELS PEARSON,
Address: 3100 NE 49TH TERR
City-St-Zip: FT.LAUDERDALE, FL

Title: D () Delete
Name: ZIO, JOHN DEL
Address: 7045 NW 72ND TERRACE
City-St-Zip: BOCA RATON, FL 33487

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: SAN MIGUEL, MICHAEL,
Address: 4442 SEA GRAPE DR
City-St-Zip: LAUDERDALE BY SEA, FL 33308

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

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: NELS PEARSON

D

01/09/2009

Electronic Signature of Signing Officer or Director

Date