

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 23, 2007 8:00 am
Secretary of State

03-23-2007 90018 029 ****61.25

DOCUMENT # 732493

1. Entity Name

SECOND SIGHT TAPING STUDIO, INC.



Principal Place of Business

2153 SE OCEAN BLVD
STUART FL 34996
US

Mailing Address

2153 SE OCEAN BLVD
STUART FL 34996
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/06)

4. FEI Number

51-0177933

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

TURNER, SARAH D
789 SW 31ST STREET
PALM CITY FL 34990

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2007

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	D	☐ Delete
NAME	SPEVAK, LARRY	
STREET ADDRESS	422 SE MAJESTIC TERRACE	
CITY-STATE-ZIP	PORT SAINT LUCIE FL 34983	

TITLE	DP	☒ Delete
NAME	GRANT, JJOHN	
STREET ADDRESS	1194 LIGHTHOUSE DR	
CITY-STATE-ZIP	PALM CITY FL 34990	

TITLE	D	☐ Delete
NAME	RUSCH, JACKIE	
STREET ADDRESS	5297 ANNINGA AVENUE	
CITY-STATE-ZIP	PALM CITY FL 34990	

TITLE	T	☐ Delete
NAME	TURNER, SARAH D	
STREET ADDRESS	789 SW 31ST STREET	
CITY-STATE-ZIP	PALM CITY FL 34990	

TITLE	DVP	☒ Delete
NAME	CARDENAS, ALEX	
STREET ADDRESS	3256 SE ST LUCIE BLVD	
CITY-STATE-ZIP	STUART FL 34994	

TITLE	D	☒ Delete
NAME	MACHADO, LINDA	
STREET ADDRESS	909 TREASURE ROAD	
CITY-STATE-ZIP	STUART FL 34994	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PRESIDENT	☐ Change ☒ Addition
NAME	CINDI LAVOIE	
STREET ADDRESS	2704 SW WILLOWood Court	
CITY-STATE-ZIP	PALM CITY FL 34990	

TITLE	VICE PRESIDENT	☐ Change ☒ Addition
NAME	TOM WELSH	
STREET ADDRESS	2925 SW LAKEMONT PLACE	
CITY-STATE-ZIP	PALM CITY FL 34990	

TITLE	SECRETARY	☐ Change ☒ Addition
NAME	JANET KEMPE	
STREET ADDRESS	543 NE SAPPHIRE WAY	
CITY-STATE-ZIP	JENSEN BEACH FL 33457	

TITLE	D	☐ Change ☒ Addition
NAME	NOPE GOODSITE	
STREET ADDRESS	8743 SE PALM Hammock Lane	
CITY-STATE-ZIP	NOPE SOUND, FL 33455	

TITLE	D	☐ Change ☒ Addition
NAME	CHRISTINE BRADY	
STREET ADDRESS	3391 NE WEST COURT, #202	
CITY-STATE-ZIP	JENSEN BEACH FL 33457	

TITLE	D	☐ Change ☒ Addition
NAME	VERONICA BARTLETT	
STREET ADDRESS	3668 SE BIG BEND TERR	
CITY-STATE-ZIP	NOPE SOUND FL 33455	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: Sarah D. Turner SARAH D TURNER 2/27/07