

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 733166

FILED
Jan 05, 2009
Secretary of State

Entity Name: INSIGHT FOR THE BLIND, INC.

Current Principal Place of Business:

1401 NE 4TH AVE
FT LAUDERDALE, FL 33304

New Principal Place of Business:

Current Mailing Address:

1401 NE 4TH AVE
FT LAUDERDALE, FL 33304

New Mailing Address:

FEI Number: 59-1626795

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SASADU, CHESTER J., JR.
2630 E. OAKLAND PARK BLVD.
FT. LAUDERDALE, FL 33306 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: ED () Delete
Name: MANSUR, CAROLINE E,
Address: 3110 NE 27TH STREET
City-St-Zip: FT LAUDERDALE, FL 33308

Title: D () Delete
Name: BISHOP, VIRGINIA H,
Address: 928 ISLAND CLUB SQUARE
City-St-Zip: VERO BEACH, FL 32963

Title: PD () Delete
Name: RICHARDSON, GEORGE J, R.
Address: 1525 SE 12TH CT
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: D () Delete
Name: GRAINGER, REBECCA
Address: 263 DUPONT COURT
City-St-Zip: AUBURNDALE, FL 33823

Title: D () Delete
Name: BERMAN, NEIL
Address: 2898 NW 27 AVENUE
City-St-Zip: BOCA RATON, FL 33434

Title: D () Delete
Name: PREMOK, MARY KATHLEEN
Address: 1401 N.E. 4TH AVE
City-St-Zip: FORT LAUDERDALE, FL 33304

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: G. EDWIN HAMILTON

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01/05/2009

Electronic Signature of Signing Officer or Director

Date