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Apr 27, 1999 8:00 am
Secretary of State

04-27-1999 90086 045 ****70.00

NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 853259

1. Corporation Name
THE FOUNDATION FIGHTING BLINDNESS, INC.

Principal Place of Business 11350 MCCORMICK ROAD EXECUTIVE PLAZA I SUITE 800 HUNT VALLEY MD 21031-1014 US	Mailing Address 11350 MCCORMICK ROAD EXECUTIVE PLAZA I SUITE 800 HUNT VALLEY MD 21031-1014 US
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2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified 06/28/1982
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	4. FEI Number 23-7135845
22. City & State	27. City & State	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
23. Zip	28. Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
24. Country	29. Country	

9. Name and Address of Current Registered Agent N. R. F. CENTRAL FLORIDA AFFILIATE 710 MIAMI SPRINGS DR. LONGWOOD FL 32779	10. Name and Address of New Registered Agent 81 Name William J. Chatlos 82 Street Address (P.O. Box Number is Not Acceptable) 201 Riverview Drive 83 Longwood, FL 32779 84 City Longwood FL 85 Zip Code 32779
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11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 617.0503, Florida Statutes.

SIGNATURE: *William J. Chatlos* **William J. Chatlos** DATE: **5/6/99**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GUND, GORDON	1.2 NAME	
STREET ADDRESS	NASSAU ST.	1.3 STREET ADDRESS	
CITY-STATE-ZIP	PRINCETON NJ	1.4 CITY-STATE-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	VCD <input type="checkbox"/> DELETE	2.1 TITLE	
NAME	FINKELSTEIN, HARRIET	2.2 NAME	
STREET ADDRESS	3605 PHILIPS DRIVE	2.3 STREET ADDRESS	
CITY-STATE-ZIP	BALTIMORE MD	2.4 CITY-STATE-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	T <input type="checkbox"/> DELETE	3.1 TITLE	
NAME	FREEDMAN, DANIEL	3.2 NAME	
STREET ADDRESS	111 HALMET HILL ROAD #1108	3.3 STREET ADDRESS	
CITY-STATE-ZIP	BALTIMORE MD	3.4 CITY-STATE-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	PD <input type="checkbox"/> DELETE	4.1 TITLE	
NAME	GOLLOB, EDWARD	4.2 NAME	
STREET ADDRESS	80 PENNSYLVANIA AVE.	4.3 STREET ADDRESS	
CITY-STATE-ZIP	KEARNY, NJ.	4.4 CITY-STATE-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	TD <input type="checkbox"/> DELETE	5.1 TITLE	
NAME	DEZIL, STEVE	5.2 NAME	
STREET ADDRESS	19 S. TENNESSE AVE.	5.3 STREET ADDRESS	
CITY-STATE-ZIP	ATLANTIC CITY NJ	5.4 CITY-STATE-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	SD <input type="checkbox"/> DELETE	6.1 TITLE	
NAME	LEA, HAYNES P	6.2 NAME	
STREET ADDRESS	101 NORTH TRYON ST.	6.3 STREET ADDRESS	
CITY-STATE-ZIP	CHARLOTTE NC	6.4 CITY-STATE-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Harriet L. Finkelstein* **Harriet L. Finkelstein** DATE: **1/6/98** (410) 785-1414

CR2E037 (1/198)