

5/26/2017

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2017-05-30 14:56:06 CST

12122025 From: Kimberly L. Highrey

Division of Corporations

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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(((H17000144164 3)))



H170001441643ABC

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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (512)418-6949  
Fax Number : (954)208-0845

Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please.\*

Email Address: \_\_\_\_\_

## FOREIGN PROFIT/NONPROFIT CORPORATION

The Lighthouse for the Blind, Incorporated

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

FILE SECOND AFTER H17000144162

PLEASE KEEP FILE DATE 5/26/2017

Electronic Filing Menu

Corporate Filing Menu

Help

S. WARREN

MAY 31 2017

**COVER LETTER**

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** The Lighthouse for the Blind, Incorporated  
Name of Corporation – must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", or "Certificate of Status" and check are submitted to register the above referenced not for profit corporation to conduct its affairs in Florida.

Please return all correspondence concerning this matter to the following:

Corey Hansen

Name of Person

The Lighthouse for the Blind, Incorporated

Firm/Company

2501 S Plum Street

Address

Seattle, WA 98144

City/State and Zip Code

chansen@seattlelh.org

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Corey Hansen

206

973-4057 ext 2457

at ( )

Name of Person

Area Code & Daytime Telephone Number

**MAILING ADDRESS:**  
New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**  
New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☐ \$70.00 Filing Fee

☐ \$78.75 Filing Fee &  
Certificate of Status

☒ \$78.75 Filing Fee &  
Certified Copy

☐ \$87.50 Filing Fee,  
Certificate of Status &  
Certified Copy

# APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

1. The Lighthouse for the Blind, Incorporated  
(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)
- (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. Washington 3. 91-0295070  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 06/07/1918 5. perpetual  
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. (Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)
7. 2501 S Plum Street  
(Principal office address)
- Seattle, WA 98144  
(Current mailing address)
8. To create and enhance opportunities for independence and self-sufficiency of people who are Blind, Deaf-Blind, and blind  
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box **NOT** acceptable)
- Name: C T Corporation System
- Office Address: 1200 South Pine Island Road
- Plantation, Florida 33324  
(City) (Zip Code)
10. Registered agent's acceptance:  
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

C T Corporation System

By:

(Registered agent's signature)

Danny Verdecchia  
Assistant Secretary

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

## 12. Names and addresses of officers and/or directors

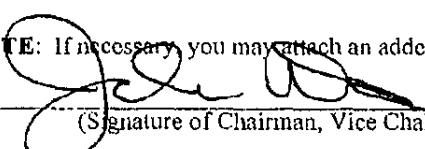
**A. DIRECTORS**Chairman: Bennet ProwsAddress: 2501 S Plum Street, Seattle, WA 98144Vice Chairman: Bill CenterAddress: 2501 S Plum Street, Seattle, WA 98144

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**President: Harry EglerAddress: 2501 S Plum Street, Seattle, WA 98144Vice President: Constance EngelstadAddress: 2501 S Plum Street, Seattle, WA 98144Secretary: David GearyAddress: 2501 S Plum Street, Seattle, WA 98144Treasurer: John WatsonAddress: 2501 S Plum Street, Seattle, WA 98144**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.13.   
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)14. John Watson, VP of Finance

(Typed or printed name and capacity of person signing application)

FILED  
17 MAY 26 PM 12:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

UNITED STATES OF AMERICA

**The State of Washington**

**Secretary of State**

I, KIM WYMAN, Secretary of State of the State of Washington and custodian of its seal,  
hereby issue this

**CERTIFICATE OF EXISTENCE**  
**OF**  
**THE LIGHTHOUSE FOR THE BLIND, INCORPORATED**

**I FURTHER CERTIFY** that the records on file in this office show that the above named entity  
was formed under the laws of the State of Washington and that its public organic record  
was filed in Washington and became effective on 6/7/1918.

**I FURTHER CERTIFY** that the entity's duration is Perpetual,  
and that as of the date of this certificate, the records of the Secretary of State  
do not reflect that this entity has been dissolved.

**I FURTHER CERTIFY** that all fees, interest and penalties owed to this state and collected  
through the Secretary of State have been paid.

**I FURTHER CERTIFY** that the most recent annual report has been delivered to the Secretary  
of State for filing and that proceedings for administrative dissolution are not pending.

Date: May 25, 2017

UBI: 178-019-820

Given under my hand and the Seal of the State  
of Washington at Olympia, the State Capital

*Kim Wyman*

Kim Wyman, Secretary of State

