

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F94000000548

1. Entity Name

RESEARCH TO PREVENT BLINDNESS, INC.

FILED
Jan 19, 2000 8:00 am
Secretary of State

01-19-2000 90184 004 ****70.00

Principal Place of Business

Mailing Address

645 MADISON AVE., 21ST FLOOR
NEW YORK NY 10022-1010

645 MADISON AVE., 21ST FLOOR
NEW YORK NY 10022-1010

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

13-1945117

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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.

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

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete
NAME **C**
STREET ADDRESS **WEEKS, DAVID F**
CITY-ST-ZIP **4058 NORTH CLIFF**
BEND OR

TITLE ☒ Change ☐ Addition
NAME **C**
STREET ADDRESS **Weeks, David F**
CITY-ST-ZIP **4058 NW Northcliff**
Bend, OR 97701

TITLE ☐ Delete
NAME **T**
STREET ADDRESS **SHEINBERG, SIDNEY JAY**
CITY-ST-ZIP **THE BUBBLE FACTORY BLDG. 105-01**
UNIVERSAL CITY CA

TITLE ☒ Change ☐ Addition
NAME **T**
STREET ADDRESS **Sheinberg, Sidney Jay**
CITY-ST-ZIP **Bubble Factory/8840 Wilshire Blvd.**
Universal City, CA 90211

TITLE ☐ Delete
NAME **T**
STREET ADDRESS **BAKER, RICHARD E**
CITY-ST-ZIP **100 UNIVERSAL CITY PLAZA**
UNIVERSAL CITY CA 91608

TITLE ☒ Change ☐ Addition
NAME **T**
STREET ADDRESS **Baker, Richard E**
CITY-ST-ZIP **220 South Valley St.**
Burbank, CA 91505

TITLE ☐ Delete
NAME **T**
STREET ADDRESS **HEWITT, RICHARD G**
CITY-ST-ZIP **711 THIRD AVE.**
NEW YORK NY 10017

TITLE ☐ Change ☐ Addition
NAME **T**
STREET ADDRESS **Hewitt, Richard G**
CITY-ST-ZIP **711 Third Ave.**
New York, NY 10017

TITLE ☐ Delete
NAME **T**
STREET ADDRESS **GAVIN, S JR**
CITY-ST-ZIP **2525 DUPONT DR.**
IRVINE CA

TITLE ☒ Change ☐ Addition
NAME **T**
STREET ADDRESS **Gavin, S Herbert S**
CITY-ST-ZIP **2525 Dupont Dr.**
Irvine, CA 92715

TITLE ☐ Delete
NAME **T**
STREET ADDRESS **KISER, ANTHONY C**
CITY-ST-ZIP **630 FIFTH AVE., STE. 1750**
NEW YORK NY 10111

TITLE ☐ Change ☐ Addition
NAME **T**
STREET ADDRESS **Kiser, Anthony C**
CITY-ST-ZIP **630 Fifth Ave., Ste. 1750**
New York, NY 10111

12. 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 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:

Diane S. Swift
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Diane S. Swift

President

1/11/00

Date

(212)752-4333

Daytime Phone #

CR2E037 (9/99)