NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # 1. Corporation Name F94000005764 (5)

THE FOUNDATION FOR GLAUCOMA RESEARCH, INC.

Principal Place of Business Mailing Address								1 162:(65 title 12111 6/811 65/11 65/11 69/11 69/11 59/11 59/11 60/11			
	190 POST ST.				90 POST ST.						
-	SUITE 830 SAN FRANCISCO CA 94102				SUITE 830 SAN FRANCISCO CA 94102						
SAN FRANCISCO ON SAIDE			·	one manuovo on vine					3. Date Incorporated or Qualified 11/07/1994 3a. Date of Last Report 04/17/1995		
2.	Principal Place	of Busine	SS	2a.	2a. Mailing Address					4. FEI Number Applied For	
21	<u> </u>				26					94-2495035 Not Applicable	
22	Suite, Apt. #, etc.				Suite, Apt. #, etc.					5. Certificate of Status Desired \$8.75 Additional Fee Required	
	City & State	/ & State			City & State					6. Election Campalgn Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
23	Zıp	1	Country	28]	Žip Cou			_		B. This corporation has liability for intangible tax under s. 199.032,	
24	r.b	<u> </u>	25	29		30				Florida Statutes	
9. Name and Address of Current F				rrent Regis						10. Name and Address of New Registered Agent	
							81	۱	Name		
	C T CORPORATION SYSTEM							82 Street Address (P.O. Box Number is Not Acceptable)			
1200 S. PINE ISLAND RD.										400001744024	
Ì	PLANTATIO	N FL 33	324				83			-03/15/9601017023	
							84	r	City	***70.00 FL 85 Zip Code	
11	1. Pursuant to th	ne provisi	ons of Sections 617.0	502 and 61	7.1508, Florida Statu	ites, the a	bove-r	hai	med corpo	ration 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 direct familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.									ard of directors. Thereby accept the appointment as registered agent. Faith		
SI	GNATURE		-								
	Sign	ature, typed	or printed name of registered		· · · · · · · · · · · · · · · · · · ·			nt s	agnature require	ed when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12	· · · · · · · · · · · · · · · · · · ·	D	OFFICERS	AND DIREC	TABELETE		3. 1 TITLE		<b>T</b>	President Change Addition	
l	- I .		ROBERT C		Maccine		2 NAME		1	Lars M. Vistnes, MD	
l			RKET ST., SUITE (	200				. 41	nnpsee	1940 Vallejo St. #2	
'	ry-si-zip SAN FRANCISCO CA									San Francisco, CA 94109	
		D	110,000 071		DELETE		1 TITLE	21 -	ZIF	Vice President XX Change Addition	
ĺ		HETHER	INGTON, JOHN		_	2.	2 NAME				
ı			ST ST., SUITE 640	)		2.	3 STREET	A[	DDRESS		
1			ANCISCO CA			2	4 CiTY-5	ST-	- ZIP	•	
_		D				DELETE 3.1		3.1 TITLE		Secretary Change KNAddition	
N.A		Lewis, i					3.2 NAME		1	Robert A. Drabkin	
st	STREET ADDRESS 251 LAFAYETTE CIR., SUITE 34				0		33 STREET ADDR		DORESS	325 Avondale Avenue	
Di	Y-ST-ZIP LAFAYETTE CA							ST-	- ZIP	Los Angeles, CA 90049	
TII		_					4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP			V.P. and Treasurer	
"		ATAF HANKAAN AT									
ı	3785 JACKSON ST. Y-ST-ZIP SAN FRANCISCO CA										
-		JAN FH	ANUISCU CA	· · · · · · · · · · · · · · · · · · ·	DELETE		4 CITY - S 1 TITLE	51	ZIP	Executive Director Change Caddition	
1	TLE				E-I DECE !	1	2 NAME			Programme Officers	
1	AME	ELI ADDRESS			5		5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		DDRESS	Tara L. Steele	
1										266 Los Cerros Avenue	
-	OTY-ST-ZIP  ITLE			<del>-</del>	DELETE			6.1 TITLE		Walnut Creek, CA 94598 ☐ Change ☐ Addition	
1	AME				•	6	2 NAME				
1	TREET ADDRESS					6	3 STREET	T AI	DORESS		
Lou	ITY - ST - 7IP					6	4 CITY-S	ST-	- ZIP		
1	4. I do hereby c	a infarma	tion indicated on this	annual rono	rt ar cunnlomontal ar	nniiai renv	nrt ic tri	IΙΑ	and accur	for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further rate and that my signature shall have the same legal effect as if made under	
	nath that Lar	m an offic	tion indicated on this er or director of the c Block 13 if changed	ornoration o	r the receiver or trus	dee empo	weredi	to	execute th	his report as required by Chapter 617, Florida Statutes; and that my name	
1											

SIGNATURE: Jaca S. Steele TARA
SIGNATURE AND TYPED OR PRINTED NAME OF BIONING OFFICER OR DIRECTOR

TARA L STEELE

1/29/96 4/5-986-3/62 Dete SC Desting Proce ()

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