

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009792

FILED
May 12, 2010
Secretary of State

Entity Name: IN THE TWINKLING OF AN EYE FOUNDATION, INC.

Current Principal Place of Business:

1916 HIGHVIEW DRIVE
PALM HARBOR, FL 34683 US

New Principal Place of Business:

Current Mailing Address:

1916 HIGHVIEW DRIVE
PALM HARBOR, FL 34683 US

New Mailing Address:

FEI Number: 55-0812056 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

VONDRUSKA, MONICA
27911 CROWN LAKE BLVD.
SUITE 201
BONITA SPRINGS, FL 34135 US

Name and Address of New Registered Agent:

LYONS, MONICA V ESQ.
27911 CROWN LAKE BLVD.
SUITE 201
BONITA SPRINGS, FL 34135 US

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: MONICA V. LYONS

05/12/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP
Name: RINEHART, ANNA L
Address: 1916 HIGHVIEW DRIVE
City-St-Zip: PALM HARBOR, FL 34683 US

Title: D
Name: LYONS, MONICA V ESQ
Address: 27911 CROWN LAKE BLVD. SUITE 201
City-St-Zip: BONITA SPRINGS, FL 34135 US

Title: DVP
Name: BARBER, TIMOTHY R
Address: 4950 59TH AVENUE SOUTH
City-St-Zip: ST. PETERSBURG, FL 33715 US

Title: D
Name: CLOUGH, BRADFORD
Address: 2546 HILLSDALE AVENUE
City-St-Zip: LARGO, FL 33774 US

Title: D
Name: PATRICK, MAUREEN E LMT
Address: 14099 BELCHER ROAD SOUTH, LOT 1085
City-St-Zip: LARGO, FL 33771 US

Title: D
Name: LUNDAHL, BETHANN
Address: 2923 SHANNON CIRCLE
City-St-Zip: PALM HARBOR, FL 34684 US

I hereby 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 all other like empowered.

SIGNATURE: ANNA L. RINEHART

PRES

05/12/2010

Electronic Signature of Signing Officer or Director

Date