

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011565

FILED  
Feb 18, 2011  
Secretary of State

**Entity Name:** BLIND SERVICES FOUNDATION OF FLORIDA, INC.

**Current Principal Place of Business:**

4700 MILLENIA BLVD  
SUITE 175  
ORLANDO, FL 328396015 US

**New Principal Place of Business:**

**Current Mailing Address:**

4700 MILLENIA BLVD  
SUITE 175  
ORLANDO, FL 32839 US

**New Mailing Address:**

**FEI Number:** 55-0888147

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

KISER, S. CRAIG  
256 COCOA LANE  
VENICE, FL 34293 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: DIR  
Name: KNOPKE, KEENAN L  
Address: 725 GRAND CIRCLE  
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: DIR  
Name: VAUGHN, JOHN  
Address: 12740 CHARDON COURT  
City-St-Zip: FORT MYERS, FL 33912

Title: DIR  
Name: ROSS, DONNA M  
Address: 4418 BLANTYRE PLACE  
City-St-Zip: VALRICO, FL 33594

Title: DIR  
Name: TOWNE, DOUGLAS G  
Address: 12552 BELCHER ROAD S  
City-St-Zip: LARGO, FL 33773

Title: DIR  
Name: GUNDE, MIKE  
Address: 210 FRANCIS PARKMAN PLACE  
City-St-Zip: DAYTONA BEACH, FL 32114

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: S. CRAIG KISER

RA

02/18/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date