

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000008647

FILED
Jan 18, 2009
Secretary of State

Entity Name: EYE ON VISION FOUNDATION CORP.

Current Principal Place of Business:

14614 JOSAIR DR
ORLANDO, FL 32826

New Principal Place of Business:

Current Mailing Address:

14614 JOSAIR DR
ORLANDO, FL 32826

New Mailing Address:

FEI Number: 20-5394501

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.
1111 LINCOLN RD STE 400
MIAMI BCH, FL 33139 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: PT () Delete
Name: AMBROSE, JENNIFER L
Address: 14614 JOSAIR DR
City-St-Zip: ORLANDO, FL 32826

Title: S () Delete
Name: BEERS, LINDA
Address: 14730 KRISTENRIGHT LANE
City-St-Zip: ORLANDO, FL 32826

Title: VP () Delete
Name: AMBROSE, GARY E
Address: 14614 JOSAIR DR
City-St-Zip: ORLANDO, FL 32826

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JENNIFER L AMBROSE

PT

01/18/2009

Electronic Signature of Signing Officer or Director

Date