

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000009624

FILED  
Jan 06, 2010  
Secretary of State

Entity Name: FLORIDA GLAUCOMA SOCIETY, INC.

**Current Principal Place of Business:**

900 NW 17TH ST.  
MIAMI, FL 33136 US

**New Principal Place of Business:**

575 GRAND CONCOURSE  
MIAMI SHORES, FL 33138 US

**Current Mailing Address:**

BASCOM PALMER EYE INSTITUTE  
MIAMI, FL 33136 US

**New Mailing Address:**

575 GRAND CONCOURSE  
MIAMI SHORES, FL 33138 US

FEI Number: 27-0406857

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BUDENZ, DONALD L MD  
900 NW 17TH ST.  
MIAMI, FL 33136 US

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

BUDENZ, DONALD L MD  
575 GRAND COCONURSE  
MIAMI SHORES, FL 33138 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:

01/06/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: GREENFIELD, DAVID S MD  
Address: 7101 FAIRWAY DR  
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

Title: VP  
Name: GEDDE, STEVEN J MD  
Address: 900 NW 17TH ST  
City-St-Zip: MIAMI, FL 33136 US

Title: S-TR  
Name: BUDENZ, DONALD L MD  
Address: 575 GRAND CONCOURSE  
City-St-Zip: MIAMI SHORES, FL 33138 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: DONALD L. BUDENZ, MD

S-TR

01/06/2010

Electronic Signature of Signing Officer or Director

Date