

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000009624

FILED  
Feb 22, 2012  
Secretary of State

Entity Name: FLORIDA GLAUCOMA SOCIETY, INC.

## Current Principal Place of Business:

C/O STEVEN J. GEDDE, VICE PRESIDENT  
5765 SW 117TH ST.  
CORAL GABLES, FL 33156 US

## New Principal Place of Business:

## Current Mailing Address:

C/O STEVEN J. GEDDE, VICE PRESIDENT  
5765 SW 117TH ST.  
CORAL GABLES, FL 33156 US

## New Mailing Address:

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  
575 GRAND COCONOURSE  
MIAMI SHORES, FL 33138 US

## Name and Address of New Registered Agent:

GEDDE, STEVEN J MD  
5765 SW 117TH STREET  
CORAL GABLES, FL 33156 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: STEVEN J. GEDDE

02/22/2012

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  
Name: LEE, RICHARD K MD  
Address: 900 NW 17TH STREET  
City-St-Zip: MIAMI, FL 33136 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: STEVEN J. GEDDE

VP

02/22/2012

Electronic Signature of Signing Officer or Director

Date