

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N11387 (0)
1. Corporation Name

MANA-SOTA LIGHTHOUSE FOR THE BLIND, INC.



Principal Place of Business

7318 N. TAMiami TRAIL
SARASOTA FL 34243-8401

Mailing Address

7318 N. TAMiami TRAIL
SARASOTA FL 34243
US

3. Date Incorporated or Qualified
10/01/1985

3a. Date of Last Report
03/06/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

4. FEI Number
59-2591136

Applied For
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BOS, MARY BETH
7318 N. TAMiami TRAIL
SARASOTA FL 34243

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME SCHMIDT, EDWARD J
STREET ADDRESS 1606 LAKESHORE DR., NO.
CITY-ST-ZIP SARASOTA FL

TITLE V
NAME ZITZELSBERGER, G.H.
STREET ADDRESS 3645 CORTEZ RD. W, SUITE 140
CITY-ST-ZIP BRADENTON FL

TITLE S
NAME TRUMPLER, RICHARD P.
STREET ADDRESS 2033 MAIN STREET
CITY-ST-ZIP SARASOTA FL

TITLE T
NAME EATON, MARGARET
STREET ADDRESS 188 SECOND STREET, SUITE 975
CITY-ST-ZIP SARASOTA FL

TITLE D
NAME SPURGE, ANNIE
STREET ADDRESS 770 S. PALM AVE., SUITE 802
CITY-ST-ZIP SARASOTA FL

TITLE D
NAME WOEHLE, CHARLIE
STREET ADDRESS P. O. BOX 14070 N/A
CITY-ST-ZIP BRADENTON FL

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Edward J. Schmidt, President

4/25/96

941-359-1404

Date

Daytime Phone #

CR2E037 (12/95)