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NONPROFIT CORPORATION ANNUAL REPORT

· 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #N16810

SIGNATURE:

The Jewish Guild For The Blind Of Florida, Inc.

Principal Place of Business 169 E. Flagler St Suite 1200

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mailing Address 169 E. Flagler St. Suite 1200

FILED Jun 30, 1999 8:00 am Secretary of State

06-30-1999 90006 020 ****61.25

212769 6216

Daytime Phone #

2. Principal Place of Business	2a. Mailing	g Address				3., Date Incorporated	or Qualifed			
1	26					09/16/19	986			
Suite, Apt. #, etc.		Apt. #, etc.				4. FEI Number			A	optied For
2	27		_			13-16233	385		N	ot Applicabl
City & State	City & 28	State				5. Certifcate of Statu	s Desired		•	Additional equired
ZipCountry	Zip		~Country			6. Election Campaig	n Financing		\$5.00	May Be
25	29	30]			Trust Fund Contri	bution		Added	to Fees
9. Name and Address of Current Registe					10. Name and Address of New Registered Agent					
Mandel, David S., Esq.			81	Name						
Mandel & Mixon LLP			82	Street	Address	(P.O. Box Number is	Not Accepta	ıble)		
169 East Flagler St.,	Suite 1	200					<u> </u>	<u> </u>		
Miami, FL 33131	24100 1		83							
Hamir, III SSISI	•		84	City					85 Zip	Code
				•				FL	. '	
1. Pursuant to the provisions of Sections 617.050	02 and 617.1508	3, Florida Statutes, 1	the above	-named	corpora	tion submits this state	ment for the	purpose of	changing its	s registered enistered
Pursuant to the provisions of Sections 617.050 office or registered agent, or both, in the State agent. I am familiar with and accept the obligation.	ations of, Section	n 617.0503, Florida	Statutes.	ine corpc	orauon s	board of directors. The	ileteny accer	/ / /	illillerit da it	sgistorod
SIGNATURE	David							5/25/9	9	
Signature typed or printed name of registered age	ent and title if applicable		istered Agen	t signature ri	equired wh	en reinstating)		DATE!		
	ND DIRECTORS		13.			ADDITIONS/CHAN	IGES TO OF	FICERS AN		
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				1		se, Alan B				
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