## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

**FILED** 

Feb 18 1998 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**SIGNATURE:** 

DOCUI	MENT # <b>N2966</b>	4 (2)		
CENTE	R FOR THE VISUALLY IMP	AIRED, INC.		
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Principal Place	e of Rueiness	Mailing Address	-··- <del></del>	
•		-		
1187 DUNN AYE 1187 DUNN AYENUE DAYTONA BEACH FL 32114 DAYTONA BCH FL 32114				3. Date Incorporated or Qualified
US		US		12/13/1988 4. FEI Number   Applied For
				59-2938258 Not Applicab
'		2a. Mailing Address		5. Certificate of Status Desired Status Desired \$8.75 Additional
Suite, Apt.	# elc	Suite, Apt. #, etc.	<del></del>	Fee Required
22	w <sub>1</sub> 010.	27		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
City & State City & State		City & State		7. Is this nonprofit corporation a homeowners association?
28 28 Zip Country Zip			Country	¥ Yes □ No
24	25	29 3	_ ′	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.
	9. Name and Address of Curren		<u> </u>	10. Name and Address of New Registered Agent
			81 Name	
HODGE, ROBERT M. 601 N. GOODRICH DRIVE DELTONA FL 32725			82 Street Add	dress (P.O. Box Number is Not Acceptable)
			83	
			B4 City	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 617.0502	2 and 617.1508, Florida Statutes	, the above-named co	
office or re agent. I a	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida, Such change was autations of, Section 617,0503, Flori-	thorized by the corporate Statutes.	orporation submits this statement for the purpose of changing its registere ation's board of directors. I hereby accept the appointment as registered
SIGNATURE .				
	Signature, typed or printed name of registered ages OFFICERS AND		Registered Agent signature req	(ulred when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	OFFICERS AND	DELETE	13.	
NAME	GARRETTE COVINGTON		1.2 NAME	381 Alancha Drive
STREET ADDRESS	663 MASON AVE		1.3 STREET ADDRESS	James O. Comella Change & Addition 381 Aleatha Drive Odytona Beach, PL
CITY-ST-ZIP	DAYTONA BOH FL 3-21	14	1.4 (1)14-31-411	
TITLE	U	DELETE	2.1 TITLE	-utz Ingo Perschmann Change Addition
NAME	DAVIS, KATHY C 121 DEERLAKE CIR		2.2 NAME	1182 Suwanee Road
STREET ADDRESS CITY-ST-ZIP	ORMOND BEACH FL 32174		2.3 STREET ADDRESS	Daytons Beach, FL 32114
TITLE	D	<b>₩</b> DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	MAURER, BOB		3.2 NAME	-
STREET ADDRESS	208 BRITTANY AVE		3.3 STREET ADDRESS	
CITY-ST-ZIP	ORMOND BEACH FL 32174	T ACLETE	3.4. CITY-ST-ZIP	
TITLE	D Joan Kelly	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME STREET ADDRESS	512 PELICAN BAY DR		4.2 NAME 4.3 STREET ADDRESS	
CITY-ST-ZIP	DAYTONA BCH FL 32 (	19	4.4 CHY-ST-ZIP	
TITLE	P	DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	DAVIS, TOM		5.2 NAME	
STREET ADDRESS	121 DEERLAKE CIR		5.3 STREET ADDRESS	
C/TY-ST-ZIP	ORMOND BEACH FL 32174	11 22.27	54 CITY-ST-ZIP	
TITLE	DI IDIN MADY D	☐ DELETE	6.1 TITLE	L. Change L. Additio
NAME STREET ADDRESS	100 Memorial Day		6.2 NAME	
CITY-ST-ZIP	DAYTONA BEACH SHORES	rmand Beach, FL	6.4 CITY - ST-ZIP	
14. I hereby o	ertify that the information supplied wit	th this filing does not qualify for t	the exemption stated in	n Section 119.07(3)(i), Florida Statutes. I further certify that the information
indicated officer or o	on this annual report or supplemental	I annual report is true and accurativer or trustee empowered to extend	ate and that my signat	ture shall have the same legal effect as if made under oath; that I am an quired by Chapter 617, Florida Statutes; and that my name appears in