2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

2/7/

FILED
Feb 21, 2003 8:00 am
Secretary of State
02-07-2003 90088 011 ****61.25

DOCUMENT # N31659

1. Entity Name
FLORIDA CENTER FOR THE BLIND, INC.

Principal Place of Business	Mailing Address
7651 S.W. HWY. 200 502 OCALA FL 34476-3869 US	7651 S.W. HWY. 200 502 OCALA FL 34476-3869 US

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2953392 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
STEVENS, DON F. 7651 S.W. HIGHWAY 200 SUITE 502 OCALA FL 34476	Name N.J. D'ORIA Street Address (P.O. Box Number is Not Acceptable) 617 S.E. 43RD AVE. City OCALA FL Zip Code 34471

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE N.J. D'Oria 2/14/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P KINARD, WILLIAM A 1107 NE 9TH ST OCALA FL 34470	☒ Delete	President Mr. Malcolm Melester 11638 SW 72 Circle Ocala, Fl 34482	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D JOHNSON, DONNA 116855 SE 95TH CT SUMMERFIELD FL 34491	☐ Delete	Director Cecil A. Jones Jr. Ph D 3 Locust Run Ocala, Fl 34472	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S D'ORIA, N.J. 617 SE 43RD AVE. OCALA FL 34471	☐ Delete	Director Mr. Frederick J. Pender 9705C SW 92nd Ct Ocala, Fl 34481	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V DEAKINS, JOHN P 125 BLUE RUN DR DUNNELLON FL 32630	☐ Delete	Director Mr. John S. Richards, Jr. 939 NE. 18th St Ocala, Fl 34470	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T HOOPER, LOWELL W. 501 MAIN ST. INVERNESS FL 34450	☐ Delete	Director Mr. Pete Janowitz 10250 NW 76th Terr. Ocala Fl. 34482	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MELESTER, MALCOLM 11638 SW 72 CIRCLE OCALA FL 34476	☒ Delete		☐ Change ☐ Addition

CR2E037 (10/02)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED Nancy M Stokes, Acting Exec Director 2/19/03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #