2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P34755

1. Entity Name

AMERICAN FOUNDATION FOR THE BLIND, INC.

FILED
May 21, 2000 8:00 am
Secretary of State
05-21-2000 90007 027 ****70.00

Principal Place of Business	Mailing Address
11 PENN PLAZA. SUITE 300 NEW YORK NY 10001	11 PENN PLAZA. SUITE 300 NEW YORK NY 10001-2006

DO NOT WRITE IN THIS SPACE

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 13-5562161 ☐ 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
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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.

SIGNATURE _____
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 Department of State**

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	C COMFORT, LYN 40 MARY STR NEWPORT RI	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T MEANEY, GEORGE M 211 WHITE OAK SHADE RD NEW CANAAN CT 06840	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VC KNOX, BARRY D. 48 SNOWBERRY LANE NEW CANAAN CT	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice Chair Douglas V. Austin, Ph.D. 3450 W. Central Ave., Suite 260 Toledo, OH 43606	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD AUGUSTO, CARL R. 1 TROTTERS LANE N=MAHWAH NJ	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S AUSTIN, DOUGLAS V 3450 WEST CENTRAL AVE. #124 TOLEDO OH 43606-1403	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary Glenna Michaels 245 Byram Shore Road Greenwich, CT 06830	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/99)

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: S. Hollingsworth ARE RECEIVED (Steve Hollingsworth, Ass't. Treasurer 212-502-7697
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR April 24, 2000 Date Daytime Phone #