DOCUMENT# 726076		
Entity Name: LIONS EYE INSTITUTE FOR TRANSPLANT AND RESEARCH, INC.		
Current Principal Place of Business:		

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

1410 NORTH 21 STREET TAMPA, FL 33605

Current Mailing Address:

1410 NORTH 21 STREET TAMPA, FL 33605

FEI Number: 59-1458151

Name and Address of Current Registered Agent:

WOODY, JASON K. 1410 NORTH 21 STREET TAMPA, FL 33605 US Certificate of Status Desired: No

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:

Electronic Signature of Registered Agent

Officer/Director Detail :

Title	PRESIDENT	Title	CHAIRMAN
Name	WOODY, JASON K.	Name	PACE, DOUGLASS E
Address	1410 NORTH 21ST STREET	Address	1410 N. 21ST STREET
City-State-Zip:	TAMPA FL 33605	City-State-Zip:	TAMPA FL 33605
Title	TREASURER	Title	CFO
Name	SUAREZ, MIKE	Name	VIAMONTES, BETTY
Address	1410 NORTH 21 STREET	Address	1410 NORTH 21 STREET
City-State-Zip:	TAMPA FL 33605	City-State-Zip:	TAMPA FL 33605
Title	SECRETARY		
Name	CARL, TREMONTI		
Address	1410 NORTH 21 STREET		
City-State-Zip:	TAMPA FL 33605		

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: BETTY VIAMONTES CFO	01/26/2023
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Electronic Signature of Signing Officer/Director Detail

FILED Jan 26, 2023 Secretary of State 6709634143CC

Date

Date