

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000002029

Entity Name: FLORIDA LIONS EYE CLINIC, INC.**Current Principal Place of Business:**10322 PENNSYLVANIA
BONITA SPRINGS, FL 34134**Current Mailing Address:**10322 PENNSYLVANIA
BONITA SPRINGS, FL 34135 US**FEI Number:** 45-0560906**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**GARCIA, ROBIN C
10322 PENNSYLVANIA AVENUE
BONITA SPRINGS, FL 34135 US*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:** ROBIN C. GOLDSTONE GARCIA

01/28/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SECRETARY
Name THOMAS, NOREEN DR.
Address 10322 PENNSYLVANIA
City-State-Zip: BONITA SPRINGS FL 34135

Title TREASURER
Name DEARMOND, LARRY
Address 10322 PENNSYLVANIA AVE
City-State-Zip: BONITA SPRINGS FL 34135

Title PRESIDENT
Name LIEB, DAWN
Address 10322 PENNSYLVANIA AVE
City-State-Zip: BONITA SPRINGS FL 34135

Title EXECUTIVE DIRECTOR
Name GOLDSTONE GARCIA, ROBIN
Address 10322 PENNSYLVANIA AVENUE
City-State-Zip: BONITA SPRINGS FL 34135

Title DIRECTOR
Name CARTER, CHUCK
Address 10322 PENNSYLVANIA
City-State-Zip: BONITA SPRINGS FL 34134

Title DIRECTOR
Name COREA, RICHARD
Address 10322 PENNSYLVANIA
City-State-Zip: BONITA SPRINGS FL 34134

Title DIRECTOR
Name DEARMOND, DAWN
Address 10322 PENNSYLVANIA
City-State-Zip: BONITA SPRINGS FL 34134

Title DIRECTOR
Name DIEGEL, TIM
Address 10322 PENNSYLVANIA
City-State-Zip: BONITA SPRINGS FL 34134

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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: ROBIN GOLDSTONE GARCIA

EXECUTIVE DIRECTOR

01/28/2022

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name FREEDMAN, HOWARD
Address 10322 PENNSYLVANIA
City-State-Zip: BONITA SPRINGS FL 34134

Title DIRECTOR
Name SHAPIRO, RICHARD
Address 10322 PENNSYLVANIA
City-State-Zip: BONITA SPRINGS FL 34134

Title DIRECTOR
Name MEEK, DONALD
Address 10322 PENNSYLVANIA
City-State-Zip: BONITA SPRINGS FL 34134