

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000008104

**Entity Name:** BROOKSVILLE VISION FOUNDATION, INC.

**Current Principal Place of Business:**

11 N. MAIN STREET  
BROOKSVILLE, FL 34601

**Current Mailing Address:**

11 N. MAIN STREET  
BROOKSVILLE, FL 34601 US

**FEI Number:** 45-1511382

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

OLIVER & COMPANY, P.A.  
18 N BROAD STREET  
BROOKSVILLE, FL 34601 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name HEARD, MICHAEL  
Address 4550 GOLF CLUB LANE  
City-State-Zip: SPRING HILL FL 34609

Title D  
Name CARMAN, JAMES W  
Address 23446 LINKS DRIVE  
City-State-Zip: BROOKSVILLE FL 34601

Title TREASURER  
Name BUCKNER, ROBERT A  
Address 11 N. MAIN STREET  
City-State-Zip: BROOKSVILLE FL 34601

Title PRESIDENT  
Name MANUEL, CLIFFORD  
Address 966 CANDLELIGHT BLVD.  
City-State-Zip: BROOKSVILLE FL 34601

*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: ROBERT A. BUCKNER**

**TREASURER**

**01/29/2013**

Electronic Signature of Signing Officer/Director Detail

Date