

2024 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000007196

Entity Name: AMERICAN PRINTING HOUSE FOR THE BLIND, INC.**Current Principal Place of Business:**1839 FRANKFORT AVENUE
LOUISVILLE, KY 40206**Current Mailing Address:**P.O. BOX 6085
LOUISVILLE, KY 40206**FEI Number:** 61-0444640**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**CROZIER, CHARLES E
12 COCONUT CT.
PALM COAST, FL 32137 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:** CHARLES CROZIER

02/05/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name BARR, DR. CHARLES
Address 301 E. MUHAMMED ALI BLVD
City-State-Zip: LOUISVILLE KY 40202

Title PRESIDENT
Name MEADOR, CRAIG
Address 1839 FRANKFORT AVENUE
City-State-Zip: LOUISVILLE KY 40206

Title CFO
Name MINYARD, STEPHENY G
Address 1839 FRANKFORT AVENUE
City-State-Zip: LOUISVILLE KY 40206

Title DIRECTOR
Name HARDY, JANE
Address 3230 INDUSTRIAL PKWY
City-State-Zip: JEFFERSONVILLE IN 47130

Title DIRECTOR
Name LEE, JULIE
Address 1839 FRANKFORT AVENUE
City-State-Zip: LOUISVILLE KY 40206

Title CHAIRMAN
Name WOOD, PHOEBE
Address 1839 FRANKFORT AVENUE
City-State-Zip: LOUISVILLE KY 40206

Title DIRECTOR
Name EVANS, ANGIE
Address 1839 FRANKFORT AVENUE
City-State-Zip: LOUISVILLE KY 40206

Title DIRECTOR
Name NICHOLS, WALTER BARRETT
Address 1839 FRANKFORT AVENUE
City-State-Zip: LOUISVILLE KY 40206

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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: STEPHENY MINYARD

CFO

02/05/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name PERKINS, BART III
Address 1839 FRANKFORT AVENUE
City-State-Zip: LOUISVILLE KY 40206

Title VP, MARKETING & SALES
Name DURHAM, ANNE
Address 1839 FRANKFORT AVENUE
City-State-Zip: LOUISVILLE KY 40206

Title VP, CIO
Name FRANCO, ALEJANDRO
Address 1839 FRANKFORT AVENUE
City-State-Zip: LOUISVILLE KY 40206

Title VP, PRODUCTION
Name PARIS, STEVE
Address 1839 FRANKFORT AVENUE
City-State-Zip: LOUISVILLE KY 40206

Title DIRECTOR
Name KAISER, MARJORIE DR.
Address 1839 FRANKFORT AVENUE
City-State-Zip: LOUISVILLE KY 40206

Title VP, GOVERNMENT & COMMUNITY AFFAIRS
Name SCHROEDER, PAUL
Address 1839 FRANKFORT AVENUE
City-State-Zip: LOUISVILLE KY 40206

Title DIRECTOR
Name HOLTON, DAVID
Address 1839 FRANKFORT AVENUE
City-State-Zip: LOUISVILLE KY 40206

Title VP, HUMAN RESOURCES
Name BUNS, VICKI
Address 1839 FRANKFORT AVENUE
City-State-Zip: LOUISVILLE KY 40206

Title DIRECTOR
Name NGUYEN, YUNG
Address 1839 FRANKFORT AVENUE
City-State-Zip: LOUISVILLE KY 40206

Title DIRECTOR
Name SHAFFER, RUSSELL
Address 1839 FRANKFORT AVENUE
City-State-Zip: LOUISVILLE KY 40206

Title DIRECTOR
Name DORSEY, GAYLE
Address 1839 FRANKFORT AVENUE
City-State-Zip: LOUISVILLE KY 40206