

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N21000011940

**Entity Name:** THE BLACK SOUL VISION INSTITUTE INC.

**Current Principal Place of Business:**

829 SE NASSAU STREET  
STUART, FL 34994

**Current Mailing Address:**

829 SE NASSAU STREET  
STUART, FL 34994 US

**FEI Number:** 87-3049838

**Certificate of Status Desired:** No

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

PATTERSON, EBONIE  
829 SE NASSAU AVENUE  
STUART, FL 34994 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            P  
Name            PATTERSON, EBONIE  
Address        829 SE NASSAU AVENUE  
City-State-Zip: STUART FL 34994

Title            VP  
Name            MCHARDY, RODNEY  
Address        829 SE NASSAU AVENUE  
City-State-Zip: STUART FL 34994

*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:** EBONIE PATTERSON

**PRESIDENT**

**05/01/2022**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date