

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 707691

FILED
Apr 17, 2012
Secretary of State

Entity Name: FLORIDA ASSOCIATION OF EDUCATIONAL DATA SYSTEMS, INC.

Current Principal Place of Business:

3302 GALLANT FOX TRAIL
TALLAHASSEE, FL 30309

New Principal Place of Business:

Current Mailing Address:

1040 E. PARK AVE
TALLAHASSEE, FL 323012677 US

New Mailing Address:

FEI Number: 59-2767969

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OPPER, JOHN
3302 GALLANT FOX TRAIL
TALLAHASSEE, FL 32309 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PPD
Name: WHITE, WILLIAM
Address: 12472 LAKE UNDERHILL #290
City-St-Zip: ORLANDO, FL 32828

Title: TD
Name: OPFER, JOHN
Address: 3302 GALLANT FOX TRAIL
City-St-Zip: TALLAHASSEE, FL 32309

Title: PED
Name: HOU, FENG
Address: 304 HERITAGE ISLES WAY
City-St-Zip: BRADENTON, FL 34212

Title: PD
Name: JASA, DAVID A
Address: 4100 STONE RIDGE CT
City-St-Zip: FORT PIERCE, FL 34951

Title: D
Name: INGRAM, THOMAS
Address: 1806 E. JACKSON ST
City-St-Zip: PENSACOLA, FL 32501

Title: D
Name: GARCIA, CANDICE
Address: 103 STEPHANIE ST
City-St-Zip: PALATKA, FL 32177

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: JOHN OPFER

TREA

04/17/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date