2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 27, 2005
Secretary of State

DOCUMENT# 730110

Entity Name: VALENCIA COMMUNITY COLLEGE FOUNDATION, INC.

Current Principal Place of Business:

190 SOUTH ORANGE AVENUE
P.O. BOX 3028
ORLANDO, FL 32802

New Principal Place of Business:

Current Mailing Address:

190 SOUTH ORANGE AVENUE
P.O. BOX 3028
ORLANDO, FL 32802

New Mailing Address:

FEI Number: 23-7442785 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GALLAGHER, GERALDINE
VALENCIA COMMUNITY COLLEGE FOUNDATION
190 S ORANGE AVENUE
ORLANDO, FL 32801 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: P ( ) Delete
Name: GALLAGHER, GERALDINE
Address: 190 SOUTH ORANGE AVENUE
City-St-Zip: ORLANDO, FL 32801

Title: CD ( ) Delete
Name: WALKER, LARRY
Address: 4401 VINELAND ROAD #A16-17
City-St-Zip: ORLANDO, FL 32811

Title: SD ( ) Delete
Name: BAILES, JESS
Address: 8989 SOUTH ORANGE AVENUE
City-St-Zip: ORLANDO, FL 32824

Title: VD (X) Delete
Name: HELMAN, ALAN
Address: 222 WEST MAITLAND BLVD
City-St-Zip: MAITLAND, FL 32751

Title: TD ( ) Delete
Name: DOLTEREN FOURNIER, HELEN VON
Address: 2471 ALOMA AVENUE SUITE 101
City-St-Zip: WINTER PARK, FL 32792

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: CD (X) Change ( ) Addition
Name: HELMAN, ALAN
Address: 222 WEST MAITLAND BLVD
City-St-Zip: MAITLAND, FL 32751

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: GERALDINE GALLAGHER P 01/27/2005

Electronic Signature of Signing Officer or Director — Date