## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#730110** 

FILED Feb 28, 2006 Secretary of State

Entity Name: VALENCIA COMMUNITY COLLEGE FOUNDATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 190 SOUTH ORANGE AVENUE 190 SOUTH ORANGE AVENUE P.O. BOX 3028 ORLANDO, FL 32801 ORLANDO, FL 32802 **Current Mailing Address: New Mailing Address:** 190 SOUTH ORANGE AVENUE P.O. BOX 3028 P.O. BOX 3028 ORLANDO, FL 32802 ORLANDO, FL 32802 FEI Number: 23-7442785 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GALLAGHER, GERALDINE GALLAGHER, GERALDINE CEO VALENCIA COMMUNITY COLLEGE FOUNDATION VALENCIA COMMUNITY COLLEGE FOUNDATION 190 S ORANGE AVENUE 190 S ORANGE AVENUE ORLANDO, FL 32801 US ORLANDO, FL 32801 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: GERALDINE GALLAGHER 02/28/2006 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition GALLAGHER, GERALDINE Name: Name: 190 SOUTH ORANGE AVENUE Address: Address: City-St-Zip: ORLANDO, FL 32801 City-St-Zip: Title: CD () Delete Title: () Change () Addition HELMAN, ALAN Name: Name: Address: 222 WEST MAITLAND BLVD Address: City-St-Zip: MAITLAND, FL 32751 City-St-Zip: Title: () Delete Title: () Change () Addition BAILES, JESS Name: Name: 8989 SOUTH ORANGE AVENUE Address: Address: City-St-Zip: ORLANDO, FL 32824 City-St-Zip: Title: ( ) Delete Title: (X) Change ( ) Addition VONDOLTEREN FOURNIER, HELEN Name: DOLTEREN FOURNIER, HELEN VON Name: 2471 ALOMA AVENUE SUITE 101 Address: 2471 ALOMA AVENUE SUITE 101 Address: City-St-Zip: WINTER PARK, FL 32792 City-St-Zip: WINTER PARK, FL 32792

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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 CEO 02/28/2006