## 2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

## Jan 16, 2007 8:00 am Secretary of State **DOCUMENT #730110** 01-16-2007 90220 007 \*\*\*\*61.25 VALENCIA COMMUNITY COLLEGE FOUNDATION, INC. Principal Place of Business Mailing Address P.O. BOX 3028 190 SOUTH ORANGE AVENUE ORLANDO, FL 32801 ORLANDO, FL 32802 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite Apt # etc. 01102007 Cha-NP CR2E037 (12/06) 4. FEI Number 23-7442785 City & State City & State Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name GALLAGHER, GERALDINE CEO Street Address (P.O. Box Number is Not Acceptable) VALENCIA COMMUNITY COLLEGE FOUNDATION 190 S ORANGE AVENUE ORLANDO, FL 32801 Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$61.25 9. Election Campaign Financing \$5.00 May Be Make check payable to Florida Department of State Trust Fund Contribution. Due by May 1, 2007 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS TITLE Delete TITLE ☐ Addition GALLAGHER, GERALDINE NAME NAME 190 SOUTH ORANGE AVENUE STREET ADDRESS STREET ADORESS ORLANDO, FL 32801 CITY-ST-ZIP CITY-ST-ZIP X Delete TITLE ☐ Change **Addition** TITLE Richard mcCree, Jr. 500 E. Princeton Strect NAME HELMAN, ALAN NAME 222 WEST MAITLAND BLVD STREET ADDRESS STREET ADDRESS Orlando, FL 32803 CITY-ST-ZIP MAITLAND, FL 32751 CITY-ST-ZIP SD TITLE ☐ Delete TITLE ☐ Change ☐ Addition BAILES, JESS NAME NAME STREET ADDRESS 8989 SOUTH ORANGE AVENUE STREET ADDRESS CITY-ST-ZIP ORLANDO, FL 32824 CITY-ST-ZIP **X** Change TITLE ☐ Delete TITLE ☐ Addition Helen von Dolteren Four Mer VONDOLTEREN FOURNIER, HELEN NAME NAME 1330 Palmetto Ave. 2471 ALOMA AVENUE SUITE 101 STREET ADDRESS STREET ADDRESS winter Park, FL 32789-4916 CITY-ST-ZIP WINTER PARK, FL 32792 CITY-ST-ZIP Delete ☐ Addition TITLE Change TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. Further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED