

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737668

FILED
Jan 04, 2012
Secretary of State

Entity Name: POLK STATE COLLEGE FOUNDATION, INC.

Current Principal Place of Business:

999 AVENUE H NE
WINTER HAVEN, FL 33881 US

New Principal Place of Business:

Current Mailing Address:

999 AVENUE H NE
WINTER HAVEN, FL 33881 US

New Mailing Address:

FEI Number: 59-1819213

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HOLDEN, EILEEN
999 AVE H NE
WINTER HAVEN, FL 33881 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: D
Name: HOLDEN, EILEEN
Address: 999 AVE H NE
City-St-Zip: WINTER HAVEN, FL 33881

Title: D
Name: SAXENA, ANU
Address: 20 LAKE WIRE DRIVE, STE 130
City-St-Zip: LAKELAND, FL 33815

Title: C
Name: PILKINGTON, LINDA
Address: 40100 US HIGHWAY 27
City-St-Zip: DAVENPORT, FL 33837

Title: D
Name: LOCKE, CARL JR
Address: 205 CENTURY BLVD
City-St-Zip: BARTOW, FL 33830

Title: D
Name: MILLER, JERRY
Address: 2051 OLD SCENIC HWY
City-St-Zip: LAKE WALES, FL 33898

Title: D
Name: MERVIS, LORETTA
Address: 210 S FLORIDA AVE, 2ND FLOOR
City-St-Zip: LAKELAND, FL 33801

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: EILEEN HOLDEN

D

01/04/2012

Electronic Signature of Signing Officer or Director

_____ Date