

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 758437

FILED
Apr 13, 2012
Secretary of State

Entity Name: FLORIDA ASSOCIATION OF PARTNERS IN EDUCATION INCORPORATED

Current Principal Place of Business:

3010 SOUTHSORE CIR
TALLAHASSEE, FL 32312 US

New Principal Place of Business:

Current Mailing Address:

3010 SOUTHSORE CIRCLE
TALLAHASSEE, FL 32312

New Mailing Address:

FEI Number: 59-2141327

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LASTOWSKI, PAM
3010 SOUTHSORE CIRCLE
TALLAHASSEE, FL 32312 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: TD
Name: SEAY, MARILYN
Address: 3938 BOBBIN BROOK CIRCLE
City-St-Zip: TALLAHASSEE, FL 32312

Title: SD
Name: SPRADLEY, DOROTHY
Address: 372 W DUVAL STREET
City-St-Zip: LAKE CITY, FL 32055

Title: PD
Name: MORRIS, LINDA
Address: 1201 ATLANTIC AVE
City-St-Zip: FERNANDINO BEACH, FL 32034 US

Title: D
Name: STARK, LIZ
Address: 1725 SE 1ST AVENUE
City-St-Zip: GAINESVILLE, FL 32641 US

Title: D
Name: TRAVIS, PAT
Address: 1250A REED CANAL ROAD
City-St-Zip: PORT ORANGE, FL 32129 US

Title: ED
Name: LASTOWSKI, PAM
Address: 3010 SOUTHSORE CIRCLE
City-St-Zip: TALLAHASSEE, FL 32312

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: MARILYN SEAY

TREA

04/13/2012

Electronic Signature of Signing Officer or Director

Date