

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006074

FILED  
Jan 14, 2010  
Secretary of State

**Entity Name:** FLORIDA NOW EDUCATION FUND INCORPORATED

**Current Principal Place of Business:**

2600 N. FLAGLER DR. #207  
WEST PALM BEACH, FL 334075521 US

**New Principal Place of Business:**

6825 NW 43 PLACE  
GAINESVILLE, FL 32606 US

**Current Mailing Address:**

14939 WARD RD  
ORLANDO, FL 32824 US

**New Mailing Address:**

FEI Number: 86-1055368

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WILSON, MARY E  
14939 WARD RD  
ORLANDO, FL 32824 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: PRES  
Name: AMIDEI, CONNIE  
Address: 4133 NW 46TH DR  
City-St-Zip: GAINESVILLE, FL 32606 US

Title: TREA  
Name: WILSON, MARY E  
Address: 14939 WARD RD  
City-St-Zip: ORLANDO, FL 32824 US

Title: VP  
Name: SLUTIAK, DONNA M  
Address: 6175 S HWY314 A  
City-St-Zip: OCKLAWAHA, FL 32179 US

Title: SECT  
Name: BLANCHARD, JANE  
Address: 2940 YORKSTOWN ST  
City-St-Zip: SARASOTA, FL 34231 US

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: MARY E WILSON

TREA

01/14/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date