

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000005598

FILED
Jan 29, 2009
Secretary of State

Entity Name: PERSONAL FINANCE EMPLOYEE EDUCATION FOUNDATION INC.

Current Principal Place of Business:

9402 SE 174TH LOOP
SUMMERFIELD, FL 34491

New Principal Place of Business:

Current Mailing Address:

9402 SE 174TH LOOP
SUMMERFIELD, FL 34491

New Mailing Address:

FEI Number: 65-1276324

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARMAN, ERIC T
9402 SE 174TH LOOP
SUMMERFIELD, FL 34491 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 () Delete
Name: FORGUE, RAYMOND E
Address: 9402 SE 174TH LOOP
City-St-Zip: SUMMERFIELD, FL 34491

Title: VPD () Delete
Name: KIM, JINHEE
Address: 9402 SE 174TH LOOP
City-St-Zip: SUMMERFIELD, FL 34491

Title: SD () Delete
Name: DUARTE, AL
Address: 9402 SE 174TH LOOP
City-St-Zip: SUMMERFIELD, FL 34491

Title: D () Delete
Name: O'NEILL, BARBARA
Address: 9402 SE 174TH LOOP
City-St-Zip: SUMMERFIELD, FL 34491

Title: PD () Delete
Name: GARMAN, ERIC T
Address: 9402 SE 174TH LOOP
City-St-Zip: SUMMERFIELD, FL 34491

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: TIFFANY, SUSAN
Address: 9402 SE 174TH LOOP
City-St-Zip: SUMMERFIELD, FL 34491

Title: SD (X) Change () Addition
Name: O'NEILL, BARBARA
Address: 9402 SE 174TH LOOP
City-St-Zip: SUMMERFIELD, FL 34491

Title: PD (X) Change () Addition
Name: GARMAN, ERIC T
Address: 9402 SE 174TH LOOP
City-St-Zip: SUMMERFIELD, FL 34491

Title: D () Change (X) Addition
Name: SHARON, BURNS
Address: 9402 SE 174TH LOOP
City-St-Zip: SUMMERFIELD, FL 34491

I hereby certify that the information supplied with this filing does not qualify 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: ETHOMASGARMAN

PD

01/29/2009

Electronic Signature of Signing Officer or Director

Date