

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000004497

FILED
Mar 03, 2011
Secretary of State

Entity Name: DEBT EDUCATION FOUNDATION, INC.

Current Principal Place of Business:

% BERT R. OLIVER, P.A.
955 17TH AVENUE, BLDG "D"
DELRAY BEACH, FL 33445

New Principal Place of Business:

C/O THE OLIVER LAW GROUP
1166 W. NEWPORT CENTER DRIVE, #100
DEERFIELD BEACH, FL 33442

Current Mailing Address:

% BERT R. OLIVER, P.A.
955 17TH AVENUE, BLDG "D"
DELRAY BEACH, FL 33445

New Mailing Address:

C/O THE OLIVER LAW GROUP
1166 W. NEWPORT CENTER DRIVE, SUITE100
DEERFIELD BEACH, FL 33442

FEI Number: 27-2542045

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OLIVER, BERT R ESQ.
955 17TH AVENUE
BLDG, "D"
DELRAY BEACH, FL 33445 US

Name and Address of New Registered Agent:

OLIVER, BERT R ESQ.
1166 W. NEWPORT CENTER DRIVE
SUITE 100
DEERFIELD BEACH, FL 33442 US

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: _____

03/03/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: OLIVER, BERT R
Address: 1166 W. NEWPORT CENTER DRIVE, #100
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: D
Name: MAHONEY, ROBERT F
Address: 7777 GLADES ROAD, SUITE 209
City-St-Zip: BOCA RATON, FL 33434

Title: D
Name: GRITTER, GERALD W
Address: 120 E PALMETTO PARK ROAD, SUITE 425
City-St-Zip: BOCA RATON, FL 33432

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: BERT R. OLIVER

PRES

03/03/2011

Electronic Signature of Signing Officer or Director

Date