

**2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Mar 21, 2005  
Secretary of State**

DOCUMENT# N96000006211

**Entity Name:** FLORIDA COMMUNITY COLLEGE EARLY CHILDHOOD EDUCATORS' NETWORK, INC.

**Current Principal Place of Business:**

CENTRAL FLORIDA COMMUNITY COLLEGE  
3001 SW COLLEGE ROAD  
OCALA, FL 34474

**New Principal Place of Business:**

**Current Mailing Address:**

CFCC  
P.O. BOX 1388  
OCALA, FL 344781388

**New Mailing Address:**

**FEI Number:** 59-3437446      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

KYLE, MARYBETH  
CENTRAL FLA COMMUNITY COLLEGE  
3001 SW COLLEGE ROAD  
OCALA, FL 34474 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 ( ) Delete  
Name: HIGHTOWER, SANDY  
Address: 999 AVENUE H N.E.  
City-St-Zip: WINTER HAVEN, FL 338814299

Title: DT ( ) Delete  
Name: KYLE, MARY B  
Address: CFCC, 3001 SW COLLEGE  
City-St-Zip: OCALA, FL 32678

Title: D ( ) Delete  
Name: CANDELORA, VICTORIA  
Address: BCC 3865 N. WICKHAM RD  
City-St-Zip: MELBOURNE, FL 32935

Title: S ( ) Delete  
Name: GARMAN, MARCIA  
Address: HCC, PO BOX 5096  
City-St-Zip: TAMPA, FL 336755096

Title: D ( ) Delete  
Name: CAMERON, ELAINE M  
Address: 1200 W. INTERNATIONAL SPEEDWAY BLVD.  
City-St-Zip: BOCA RATON, FL 32114

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MARYBETH KYLE

TREA

03/21/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date