


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2006 8:00 am
Secretary of State

03-13-2006 90050 040 ****61.25

DOCUMENT # N96000006211					
1. Entity Name FLORIDA COMMUNITY COLLEGE EARLY CHILDHOOD EDUCATORS' NETWORK, INC.					
Principal Place of Business CENTRAL FLORIDA COMMUNITY COLLEGE 3001 SW COLLEGE ROAD OCALA, FL 34474		Mailing Address CFCC P.O. BOX 1388 OCALA, FL 34478-1388			
2. Principal Place of Business Seminole Community Coll Suite, Apt. #, etc. 100 Weldon Blvd		3. Mailing Address SCC / Child Development Suite, Apt. #, etc. 100 Weldon Blvd.		03082006 Chg-NP CR2E037 (11/05)	
City & State Sanford, FL		City & State Sanford, FL		4. FEI Number 59-3437446	
Zip 32773		Country Seminole		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent KYLE, MARYBETH CENTRAL FLA COMMUNITY COLLEGE 3001 SW COLLEGE ROAD OCALA, FL 34474		7. Name and Address of New Registered Agent Name: Nana Robertson Street Address (P.O. Box Number is Not Acceptable): Seminole Community College 100 Weldon Blvd. City: Sanford FL Zip Code: 32773			
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE: <u>Nana Robertson (Nana Robertson)</u>		(NOTE: Registered Agent signature required when reinstating)		DATE: <u>3/8/06</u>	
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HIGHTOWER, SANDY 999 AVENUE H N.E. WINTER HAVEN, FL 338814299	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Anne Sullivan St. Petersburg College P.O. Box 13489 St. Petersburg, FL 33733-3489	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT KYLE, MARY B CFCC, 3001 SW COLLEGE OCALA, FL 32678	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT NANA ROBERTSON SCC - 100 Weldon Blvd. Sanford, FL 32773	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CANDELORA, VICTORIA BCC 3865 N. WICKHAM RD MELBOURNE, FL 32935	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Sarah Whitacre IRCC - 3209 Virginia Ave. Ft. Pierce, FL 33981	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GARMAN, MARCIA HCC, PO BOX 5096 TAMPA, FL 336755096	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS Joan Campbell SFCC - 3000 NW 83 rd St. Gainesville, FL 32606	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CAMERON, ELAINE M 1200 W. INTERNATIONAL SPEEDWAY BLVD. BOCA RATON, FL 32114	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Sandy Hightower 999 Avenue H N.E. Winter Haven, FL 33881-4299	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Nana Robertson (NANA ROBERTSON)</u>		SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date: <u>401.708.2674</u> Daytime Phone #	