

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000002934

FILED
Jan 07, 2011
Secretary of State

Entity Name: THE DESOTO COUNTY EDUCATION FOUNDATION, INC.

Current Principal Place of Business:

530 LASOLONA AVE
ARCADIA, FL 34266

New Principal Place of Business:

Current Mailing Address:

530 LASOLONA AVE
ARCADIA, FL 34266

New Mailing Address:

FEI Number: 59-3533706

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LAND, TED
810 WEST IMOGENE STREET
ARCADIA, FL 34266 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
Name: STEMM, MARY
Address: POST OFFICE BOX 1863
City-St-Zip: ARCADIA, FL 34265

Title: D
Name: BARNWELL, MELBA
Address: POST OFFICE BOX 525
City-St-Zip: FORT OGDEN, FL 34265

Title: D
Name: LAND, TED
Address: 810-WEST-IMOGENE STREET
City-St-Zip: ARCADIA, FL 34266

Title: D
Name: SORRELLS, HOWARD
Address: 1653 SE TOWNSEND AVENUE
City-St-Zip: ARCADIA, FL 34266

Title: D
Name: BOWERS, RICHARD
Address: 1937 SW HENDRY STREET
City-St-Zip: ARCADIA, FL 34266

Title: D
Name: RYALS, ANN
Address: P.O. BOX 127
City-St-Zip: FORT OGDEN, FL 34267

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: MELBA RAE BARNWELL

MRS.

01/07/2011

Electronic Signature of Signing Officer or Director

Date