

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006835

FILED
Feb 11, 2005
Secretary of State

Entity Name: FLORIDA ASSOCIATION OF INTERNATIONAL EDUCATORS, INC.

Current Principal Place of Business:

4202 E FOWLER AVE
%ISSS, UNIV OF SOUTH FL, CPR 107
TAMPA, FL 33620

New Principal Place of Business:

USF/ISSS,4202 E FOWLER AVE
CPR 107
TAMPA, FL 33620

Current Mailing Address:

4202 E FOWLER AVE
%ISSS, UNIV OF SOUTH FL, CPR 107
TAMPA, FL 33620

New Mailing Address:

USF/ISSS,4202 E FOWLER AVE
CPR 107
TAMPA, FL 33620

FEI Number: 59-3641239

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TAYLOR, MARCIA E
4202 E FOWLER AVE CPR 107
%ISSS, UNIV OF SOUTH FL
TAMPA, FL 33620 US

Name and Address of New Registered Agent:

TAYLOR, MARCIA E
USF/ISSS,4202 E FOWLER AVE
CPR 107
TAMPA, FL 33620 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: _____

02/11/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: TAYLOR, MARCIA E
Address: CPR 107, 4202 E FOWLER AVE
City-St-Zip: TAMPA, FL 33620

Title: D () Delete
Name: LEVISTE, MARIA
Address: UNIVERSITY PARK GC 217
City-St-Zip: MIAMI, FL 33199

Title: CD () Delete
Name: HAGEN, KRISTEN
Address: 107 S. WILDWOOD DR
City-St-Zip: TALLAHASSEE, FL 32306

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: TAYLOR, MARCIA E
Address: USF/ISSS,4202 E FOWLER AVE
City-St-Zip: TAMPA, FL 33620

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: MARCIA E. TAYLOR

TD

02/11/2005

Electronic Signature of Signing Officer or Director

Date