2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08500

FILED Apr 24, 2006 Secretary of State

Entity Name: FLORIDA EDUCATION FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business: 325 W. GAINES STREET 544 FLORIDA EDUCATION CENTER TALLAHASSEE, FL 323990400 US **New Mailing Address: Current Mailing Address:** 325 W. GAINES STREET 544 FLORIDA EDUCATION CENTER TALLAHASSEE, FL 323990400 US FEI Number: 59-2718509 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MCCAIN, DIANE NIETO, RONALD A 325 W GAINES ST 325 W GAINES ST **SUITE 1544** SUITE 1544 TALLAHASSEE, FL 323990400 US TALLAHASSEE, FL 323990400 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: RONALD A. NIETO 04/24/2006 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition SMITH, JAN E Name: Name: 1111 3RD AVENUE Address: Address: City-St-Zip: BRADENTON, FL 34205 City-St-Zip: Title: () Delete Title: () Change () Addition LEVY, ALAN Name: Name: Address: 75 ROYAL PALM DR. Address: City-St-Zip: FT. LAUDERDALE, FL 33301 City-St-Zip: Title: () Delete Title: () Change () Addition TRIPATHY, NIRMAL Name: Name: 33 E FLAGLER ST. Address: Address: City-St-Zip: MIAMI, FL 33131 US City-St-Zip: Title: Title: () Change () Addition () Delete Name: DESIR, DR. RANLEY Name: 2925 AVENTURA BLVD., SUITE 200 Address: Address: City-St-Zip: AVENTURA, FL 33180 US City-St-Zip: Title: () Delete Title: (X) Change () Addition JAMES, SUSAN HORNE, JAMES Name: Name: 1001 BRICKELL BAY, SUITE 2910 POST OFFICE BOX 8339 Address: Address: City-St-Zip: MIAMI, FL 33131 US City-St-Zip: FLEMING ISLAND, FL 32006 US Title: () Delete Title: () Change () Addition BROOKS, DERRICK Name: Name: Address: 2915 W FERN ST. Address: TAMPA, FL 33614 US City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: RONALD A. NIETO ED 04/24/2006