2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # N00000007277

1. Entity Name

BURTON-VOCELLE EDUCATIONAL FOUNDATION, INC.



FILED May 03, 2007 08:00 A Secretary of State

Principal Place of Business

1849 25TH STEET VERO BEACH, FL 32960 Mailing Address

1849 25TH STEET VERO BEACH, FL 32960



04302007 No Chg-NP

CR2E037 (4/06)

4. FEI Number 03-0466776

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BURTON, JANE P 1849 25TH STEET VERO BEACH, FL 32960

DO NOT WRITE IN THIS SPACE

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				
	Filing Fee is \$61.25 Due by May 1, 2007	Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees	U00000760415 05/25/07-80010-019 61.25
10.	OFFICERS AND DIRE	CTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BURTON, JANE P 1849 25TH STEET VERO BEACH, FL 32960			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VOCELLE, LOUIS B JR 3333 20TH STREET VERO BEACH, FL 32960			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BURTON, THOMAS W 1849 25TH STREET VERO BEACH, FL 32960	DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,		IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	·			

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

zenT

129/2007

772/569-2284