

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007179

FILED
Apr 13, 2009
Secretary of State

Entity Name: FLORIDA SCIENCE OLYMPIAD, INCORPORATED

Current Principal Place of Business:

4000 CENTRAL FLORIDA BLVD
BLDG 53 CREOL
ORLANDO, FL 32816

New Principal Place of Business:

Current Mailing Address:

4000 CENTRAL FLORIDA BLVD
BLDG 53 CREOL C/O MIKE MCKEE
ORLANDO, FL 32816

New Mailing Address:

7800 EL CAMINO REAL
2101
COLMA, CA 94014

FEI Number: 20-0167278

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCKEE, MIKE
825 SOUTH BUMBY AVE
ORLANDO, FL 32803 US

Name and Address of New Registered Agent:

MCKEE, MIKE
7800 EL CAMINO REAL
2101
COLMA, FL 94014 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: MIKE MCKEE

04/13/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MCKEE, MIKE
Address: 825 SOUTH BUMBY AVE
City-St-Zip: ORLANDO, FL 32803

Title: VP () Delete
Name: GILLEY, JASON
Address: 5951 BROWN BARK DR
City-St-Zip: ORLANDO, FL 32822

Title: S/T () Delete
Name: GOTTESMAN, VIVIAN
Address: 10022 MEDALLION BLUFF LANE
City-St-Zip: ORLANDO, FL 32829

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MCKEE, MIKE
Address: EL CAMINO REAL, APT. 2101
City-St-Zip: COLMA, CA 94014

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 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: MIKE MCKEE

P

04/13/2009

Electronic Signature of Signing Officer or Director

Date