

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 704396

**Entity Name:** FLORIDA BANKERS EDUCATIONAL FOUNDATION**Current Principal Place of Business:**1001 THOMASVILLE RD  
STE 201  
TALLAHASSEE, FL 32303**Current Mailing Address:**P O BOX 1360  
TALLAHASSEE, FL 32302 US**FEI Number:** 59-6139568**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NEWTON, LETTY  
1001 THOMASVILLE RD  
STE 201  
TALLAHASSEE, FL 32303 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:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Officer/Director Detail :**

Title	T
Name	NEWTON, LETTY
Address	1001 THOMASVILLE RD, STE 201
City-State-Zip:	TALLAHASSEE FL 32303

Title	D
Name	LIPE, DANIEL
Address	28801 SW 157TH AVE
City-State-Zip:	HOMESTEAD FL 33033

Title	D
Name	PENNEY, WILLIAM
Address	571 BEACHLAND BLVD
City-State-Zip:	VERO BEACH FL 32963

Title	T
Name	JORDAN, LESLEY
Address	1001 THOMASVILLE RD SU 201
City-State-Zip:	TALLAHASSEE FL 32302

Title	DIRECTOR
Name	DORSEY, JOSEPH
Address	2400 N COMMERCE PKY
City-State-Zip:	WESTON FL 33326

*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:** LESLEY JORDAN

SVP/CFO

01/27/2015

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date