2014 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N04000009443

Entity Name: ALTERNATIVE EDUCATION FOUNDATION INC.

FILED Sep 11, 2014 **Secretary of State** CC9681891538

Current Principal Place of Business:

4650 SW 61ST AVE DAVIE, FL 33314

Current Mailing Address:

4650 SW 61ST AVE DAVIE, FL 33314

FEI Number: 20-1776950 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FEIN, LANCE 4650 SW 61ST AVE DAVIE, FL 33314 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 **OFFICER** Title

Name SERFER, GREGORY DR. Name STAVITSKY, MARK DR. 4650 SW 61ST AVE 4650 SW 61ST AVE Address Address City-State-Zip: DAVIE FL 33314 DAVIE FL 33314 City-State-Zip:

Title D Title **TREASURER**

Name FEIN, LANCE Name GRIFFITH, CHRISTINA

Address 4650 SW 61ST AVE Address 9 CAYUGA RD City-State-Zip: DAVIE FL 33314

City-State-Zip: SEA RANCHES LAKES FL 33308

Title VΡ Title **OFFICER**

Name HIERHOLZER, CHRISTY WEISSMAN, LEE Name Address 4650 SW 61ST AVE Address 4650 SW 61ST AVE DAVIE FL 33314 City-State-Zip: City-State-Zip: DAVIE FL 33314

Title **SECRETARY**

Name RANDEL, ROBERTA DR. 4650 SW 61ST AVE Address City-State-Zip: DAVIE FL 33314

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.

09/11/2014 SIGNATURE: LANCE FEIN DIRECTOR