Electronic Signature of Signing Officer/Director Detail

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08500

Entity Name: FLORIDA EDUCATION FOUNDATION, INC.

Current Principal Place of Business:

FLORIDA EDUCATION FOUNDATION 325 WEST GAINES STREET, SUITE 1524 TALLAHASSEE, FL 32399-0400

Current Mailing Address:

FLORIDA EDUCATION FOUNDATION 325 WEST GAINES STREET, SUITE 1524 TALLAHASSEE, FL 32399-0400 US

FEI Number: 59-2718509

Name and Address of Current Registered Agent:

PICCOLO, KRISTIN C EXECUTIVE DIRECTOR FLORIDA EDUCATION FOUNDATION 325 WEST GAINES STREET, SUITE 1524 TALLAHASSEE, FL 32399-0400 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.

| | a entity submits this statement for the pulpose of changing its | registered onice of regis | tered agent, or bour, in the State of Fionda. | |
|-----------------|-----------------------------------------------------------------|---------------------------|-----------------------------------------------------------------|--|
| SIGNATURE | E: KRISTIN PICCOLO | | 04/11/2022 | |
| | Electronic Signature of Registered Agent | | Date | |
| Officer/Dire | ctor Detail : | | | |
| Title | DIRECTOR | Title | DIRECTOR | |
| Name | MERLINO, JOHN | Name | WILT, MAUREEN A | |
| Address | AT&T 150 WEST FLAGLER STREET SUITE | Address | FLORIDA POWER & LIGHT COMPANY 700 UNIVERSE BLVD | |
| | 1901 | City-State-Zip: | JUNO BEACH FL 33408 | |
| City-State-Zip: | MIAMI FL 33130 | T :0 - | | |
| Title | SECRETARY | Title | CHAIRMAN | |
| Name | EGUSQUIZA, RAQUEL | Name | HOKANSON, CHARLES | |
| Address | MARLINS FOUNDATION 501 MARLINS WAY | Address | HELIOS EDUCATION FOUNDATION 101 EAST KENNEDY BLVD SUITE 2050 | |
| City-State-Zip: | MIAMI FL 33125 | City-State-Zip: | TAMPA FL 33602 | |
| Title | VC | Title | DIRECTOR | |
| Name | MONTEIRO-TRIBBLE, VELMA | Name | BRISE, RONALD A. | |
| Address | FLORIDA BLUE 4800 DEERWOOD CAMPUS PARKWAY | Address | GUNSTER 200 S. ORANGE AVENUE SUITE 1400 | |
| City-State-Zip: | JACKSONVILLE FL 32246 | City-State-Zip: | ORLANDO FL 32801 | |
| | | Title | EXECUTIVE DIRECTOR | |
| Title | MEMBER | Name | PICCOLO, KRISTIN | |
| Name | CHANCE, MARY | Address | FLORIDA EDUCATION FOUNDATION | |
| Address | CONSORTIUM OF FLORIDA EDUCATION FOUNDATIONS PO BOX 358719 | | 325 W GAINES ST. SUITE 1524 | |
| | | City-State-Zip: | TALLAHASSEE FL 32399-0400 | |
| City-State-Zip: | GAINESVILLE FL 32635-8719 | Continues | Continues on page 2 | |

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: KRISTIN PICCOLO

EXECUTIVE DIRECTOR 04/11/2022

Date

FILED Apr 11, 2022 Secretary of State 3383560206CC

Certificate of Status Desired: No

Officer/Director Detail Continued :

| Title | TREASURER | Title | DIRECTOR |
|-----------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Name | MATTHEWS, REBECCA | Name | CHARTRAND, GARY |
| Address | AUTOMATED HEALTH SYSTEMS 2728 CENTERVIEW DRIVE 300 | Address | 6600 CORPORATE CENTER PARKWAY |
| City-State-Zip: | TALLAHASSEE FL 32301 | City-State-Zip: | JACKSONVILLE FL 32255 |
| Title | DIRECTOR | Title | DIRECTOR |
| Name | GAETZ, DON | Name | DORWORTH, CHRIS |
| Address | 4300 LEGENDARY DRIVE SUITE 230 | Address | LAND DEVELOPER 1520 WHITSTABLE COURT |
| City-State-Zip: | DESTIN FL 32541 | City-State-Zip: | HEATHROW FL 32746 |
| | | | |
| Title | MEMBER | Title | DIRECTOR |
| Title Name | MEMBER PAINTER, SARAH | Title Name | DIRECTOR GRANT, JOHN |
| | | | |
| Name | PAINTER, SARAH 2022 FLORIDA TEACHER OF THE YEAR | Name | GRANT, JOHN TAMPA ESTATE PLANNERS 16614 N DALE MABRY HWY |
| Name Address | PAINTER, SARAH 2022 FLORIDA TEACHER OF THE YEAR 325 WEST GAINES STREET 1524 | Name Address | GRANT, JOHN TAMPA ESTATE PLANNERS 16614 N DALE MABRY HWY |
| Name Address City-State-Zip: | PAINTER, SARAH 2022 FLORIDA TEACHER OF THE YEAR 325 WEST GAINES STREET 1524 TALLAHASSEE FL 32399 | Name Address City-State-Zip: | GRANT, JOHN TAMPA ESTATE PLANNERS 16614 N DALE MABRY HWY TAMPA FL 33618 |
| Name Address City-State-Zip: Title | PAINTER, SARAH 2022 FLORIDA TEACHER OF THE YEAR 325 WEST GAINES STREET 1524 TALLAHASSEE FL 32399 AUDIT CHAIR TEDROW, TARA LOWNDES, DROSDICK, DOSTER, KANTOR & | Name Address City-State-Zip: Title | GRANT, JOHN TAMPA ESTATE PLANNERS 16614 N DALE MABRY HWY TAMPA FL 33618 MEMBER, BOARD OF DIRECTORS |
| Name Address City-State-Zip: Title Name | PAINTER, SARAH 2022 FLORIDA TEACHER OF THE YEAR 325 WEST GAINES STREET 1524 TALLAHASSEE FL 32399 AUDIT CHAIR TEDROW, TARA | Name Address City-State-Zip: Title Name | GRANT, JOHN TAMPA ESTATE PLANNERS 16614 N DALE MABRY HWY TAMPA FL 33618 MEMBER, BOARD OF DIRECTORS CRAWFORD-WHITAKER, KRISTIN 3074 FERMANAGH DRIVE |