

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N11000004083

**Entity Name:** TEEN MOM EDUCATION FOUNDATION, INC.

**Current Principal Place of Business:**

5250 WEST RIVERBEND ROAD  
DUNNELLON, FL 34433

**Current Mailing Address:**

5250 WEST RIVERBEND ROAD  
DUNNELLON, FL 34433 US

**FEI Number:** 38-3838523

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

MCCOSKEY-REISERT, DEBRA S  
5250 WEST RIVERBEND ROAD  
DUNNELLON, FL 34433 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 P  
Name MCCOSKEY-REISERT, DEBRA S  
Address 5250 WEST RIVERBEND ROAD  
City-State-Zip: DUNNELLON FL 34433

Title VP  
Name REISERT, STEVEN R  
Address 5250 WEST RIVERBEND ROAD  
City-State-Zip: DUNNELLON FL 34433

Title BM  
Name EURTON, SHONDA R  
Address 600 COUNTRY CLUB DRIVE, #72  
City-State-Zip: NEW ALBANY IN 47150

Title BM  
Name UTZ, CHRISTY  
Address 2209 BEELER STREET  
City-State-Zip: NEW ALBANY IN 47150

*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:** DEBRA MCCOSKEY-REISERT

**PRESIDENT**

**02/05/2014**

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

\_\_\_\_\_  
Date