2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000011300

Entity Name: VISION FOR EXCELLENCE, INC.

Current Principal Place of Business:

221 NORTH HOGAN STREET 530 JACKSONVILLE, FL 32202

Current Mailing Address:

221 NORTH HOGAN STREET 530 JACKSONVILLE, FL 32202 US

FEI Number: 45-4299387

Name and Address of Current Registered Agent:

SHIRK, MATTHEW A 407 NORTH LAURA STREET JACKSONVILLE, FL 32202 US

Certificate of Status Desired: Yes

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	E MATTHEW A. SHIRK			02/02/2016
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	DIRECTOR, COO	Title	DIRECTOR	
Name	ANDERSON, KENDALL	Name	SHIRK, MATTHEW A	
Address	221 NORTH HOGAN STREET	Address	407 NORTH LAURA STREET	
City-State-Zip:	530 JACKSONVILLE FL 32202	City-State-Zip:	JACKSONVILLE FL 32202	
Title	PROGRAM DIRECTOR	Title Name	PROGRAM SPECIALIST WILKINSON, HUGH	
Name	DENIS, SANCHEZ	Address	407 NORTH LAURA STREET	
Address	407 NORTH LAURA STREET	City-State-Zip: JACKSONVILLE FL 32202		
City-State-Zip:	JACKSONVILLE FL 32202			
Title	DIRECTOR			
Name	FREDERICKS, FELECIA			
Address	221 NORTH HOGAN STREET 530			
City-State-Zip:	JACKSONVILLE FL 32202			

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: KENDALL ANDERSON

COO

Electronic Signature of Signing Officer/Director Detail

Date