

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000004466

Entity Name: FLORIDA TAX EDUCATION FOUNDATION, INC.**Current Principal Place of Business:**420 S. ORANGE AVENUE
SUITE 700
ORLANDO, FL 32801**Current Mailing Address:**P. O. BOX 2346
ORLANDO, FL 32802-2346 US**FEI Number:** 45-5197356**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DEAN MEAD SERVICES, LLC
420 S. ORANGE AVENUE
SUITE 700
ORLANDO, FL 32801 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 VP
Name KEANE, CRISTIN C.
Address 4221 W. BOY SCOUT BLVD
City-State-Zip: TAMPA FL 33607

Title D, VP
Name PRATT, DAVID
Address 2255 GLADES RD
SUITE 421A
City-State-Zip: BOCA RATON FL 33431

Title VP
Name ACOSTA, JOLYON
Address 1801 N. HIGHLAND AVE
City-State-Zip: TAMPA FL 33602

Title VP
Name BOVAY, JOHN C.
Address 3940 NW 16TH BLVD
BLDG B
City-State-Zip: GAINESVILLE FL 32605

Title D, VP, T
Name DETZEL, LAUREN Y.
Address 420 S. ORANGE AVE
SUITE 700
City-State-Zip: ORLANDO FL 32801

Title D, VP
Name TESCHER, DONALD R.
Address 925 S. FEDERAL HWY
SUITE 500
City-State-Zip: BOCA RATON FL 33432

Title VP
Name AHEARN, MATTHEW J.
Address 420 S. ORANGE AVE
SUITE 700
City-State-Zip: ORLANDO FL 32801

Title D, P
Name BOWERS, DAVID
Address 505 S. FLAGLER DR
SUITE 1100
City-State-Zip: WEST PALM BEACH FL 33401

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: DAVID BOWERS**PRESIDENT****03/17/2020**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title VP
Name BURNS, MICHAEL
Address 647 MIMOSA BLVD
City-State-Zip: ROSWELL GA 30075

Title VP
Name FRIEL, MICHAEL
Address 320 HOLLAND HALL
City-State-Zip: GAINESVILLE FL 32611

Title VP
Name NOSTRO, LOUIS J. JR.
Address 1441 BRICKELL AVE
SUITE 1230
City-State-Zip: MIAMI FL 33131

Title VP
Name SCROGGIN, JOHN J.
Address 647 MIMOSA BLVD
City-State-Zip: ROSWELL GA 30075

Title VP
Name LEPREE, SUMMER AYERS
Address 1450 BRICKELL AVE
SUITE 2300
City-State-Zip: MIAMI FL 33131

Title VP
Name CALFEE, DENNIS A.
Address P.O. BOX 117625
City-State-Zip: GAINESVILLE FL 32611

Title VP
Name KOHNER, MICHAEL L.
Address 777 S. FLAGLER DR
SUITE 1700-W
City-State-Zip: WEST PALM BEACH FL 33401

Title VP
Name PHILLIPS, A. BRIAN
Address 912 HIGHLAND AVE
City-State-Zip: ORLANDO FL 32803

Title VP
Name BOWMAN, SCOTT A.
Address 2255 GLADES RD
SUITE 421A
City-State-Zip: BOCA RATON FL 33431

Title VP
Name MURRAY, FRED F.
Address 309 VILLAGE DR
City-State-Zip: GAINESVILLE FL 32611