

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000010454

**Entity Name:** PHOENIX TREE EDUCATIONAL FOUNDATION, INC.

**Current Principal Place of Business:**

6865 WEST COLONIAL DRIVE  
ORLANDO, FL 32818

**Current Mailing Address:**

6865 WEST COLONIAL DRIVE  
ORLANDO, FL 32818 US

**FEI Number:** 46-1337013

**Certificate of Status Desired:** No

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

KENNEDY, ANGELA H  
2170 BENT GRASS AVE.  
OCOE, FL 34761 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 KENNEDY, ANGELA H  
Address 2170 BENT GRASS AVE.  
City-State-Zip: OCOEE FL 34761

Title VP  
Name KENNEDY, DEJUAN  
Address 2170 BENT GRASS AVE.  
City-State-Zip: OCOEE FL 34761

Title S  
Name HIRES, CLAUDIA M  
Address 3521 DOMINO DRIVE  
City-State-Zip: ORLANDO FL 32805

Title D  
Name MORROW, VANESSA  
Address 1212 S HIAWASSE RD APT 514  
City-State-Zip: ORLANDO FL 32835

Title D  
Name MILLER, WANAKEE  
Address 1619 BANKHEAD AVE  
City-State-Zip: MASCOTA FL 34753

Title D  
Name HENRY, ADRIANNE  
Address 2869 LYNDSCAPE ST  
City-State-Zip: ORLANDO FL 32833

*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:** ANGELA KENNEDY

**PRESIDENT**

**05/01/2015**

Electronic Signature of Signing Officer/Director Detail

Date