

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000010454

Entity Name: PHOENIX TREE EDUCATIONAL FOUNDATION, INC.**Current Principal Place of Business:**1001 ROGER WILLIAMS ROAD
APOPKA, FL 32703**Current Mailing Address:**1001 ROGER WILLIAMS ROAD
APOPKA, FL 32703 US**FEI Number: 46-1337013****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KENNEDY, ANGELA H
1044 DUSTY PINE DRIVE
APOPKA, FL 32703 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	1044 DUSTY PINE DRIVE
City-State-Zip:	APOPKA FL 32703

Title	VP
Name	KENNEDY, DEJUAN
Address	1044 DUSTY PINE DRIVE
City-State-Zip:	APOPKA FL 32703

Title	S
Name	CANNON, LLIANE S
Address	1878 ANCIENT OAK DRIVE
City-State-Zip:	OCOE FL 34761

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

Title	DIRECTOR
Name	DRAYTON, NATHIFA
Address	586 ERROL PARKWAY
City-State-Zip:	APOPKA FL 32712

Title	DIRECTOR
Name	MAXWELL, VALERIE
Address	6670 HAWKSMOOR DRIVE
City-State-Zip:	ORLANDO FL 32818

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****04/14/2021**_____
Electronic Signature of Signing Officer/Director Detail_____
Date