# DOCUMENT# N13000006904

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: EXCELLENCE IN EDUCATION NATIONAL, INC.

#### **Current Principal Place of Business:**

215 SOUTH MONROE STREET SUITE 710 TALLAHASSEE, FL 32301

#### **Current Mailing Address:**

PO BOX 10691 TALLAHASSEE, FL 32302 US

### FEI Number: 46-3332269

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

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 US Certificate of Status Desired: No

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

#### **Officer/Director Detail :**

Officer/Director Detail :				
Title	TREASURER	Title	SECRETARY	
Name	HANDY, F. PHILIP	Name	ZACHARIAH, ZACHARIAH P.	
Address	215 SOUTH MONROE STREET SUITE 710	Address	215 SOUTH MONROE STREET SUITE 710	
City-State-Zip:	TALLAHASSEE FL 32301	City-State-Zip:	TALLAHASSEE FL 32301	
Title	EXECUTIVE DIRECTOR	Title	DIRECTOR	
Name	LEVESQUE, PATRICIA	Name	CANTOR, ERIC	
Address	215 SOUTH MONROE STREET SUITE 710	Address	215 SOUTH MONROE STREET SUITE 710	
City-State-Zip:	TALLAHASSEE FL 32301	City-State-Zip:	TALLAHASSEE FL 32301	
Title	CHAIRMAN/PRESIDENT	Title	DIRECTOR	
Name	BUSH, JOHN E.	Name	HASLAM, DEE	
Address	215 SOUTH MONROE STREET SUITE 710	Address	215 SOUTH MONROE STREET SUITE 710	
Address City-State-Zip:		Address City-State-Zip:		
	SUITE 710		SUITE 710	
City-State-Zip:	SUITE 710 TALLAHASSEE FL 32301	City-State-Zip:	SUITE 710 TALLAHASSEE FL 32301	
City-State-Zip: Title	SUITE 710 TALLAHASSEE FL 32301 DIRECTOR	City-State-Zip: Title	SUITE 710 TALLAHASSEE FL 32301 DIRECTOR	

#### 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: PATRICIA LEVESQUE

EXECUTIVE DIRECTOR 04/24/2023

Electronic Signature of Signing Officer/Director Detail

# FILED Apr 24, 2023 Secretary of State 5262811680CC

Date

Date

## **Officer/Director Detail Continued :**

Title	DIRECTOR
Name	RAUNER, BRUCE
Address	215 SOUTH MONROE STREET SUITE 710
City-State-Zip:	TALLAHASSEE FL 32301