2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16000000918

Entity Name: THE EDUCATION FOUNDATION OF PUTNAM COUNTY, INC.

FILED Feb 08, 2023 Secretary of State 2934518835CC

Current Principal Place of Business:

113 SHELL TRAIL SATSUMA, FL 32189

Current Mailing Address:

P.O. BOX 402

PALATKA, FL 32178 US

FEI Number: 81-1573393 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

HOLZKNECHT, CATHLEEN 113 SHELL TRAIL SATSUMA, FL 32189 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: CATHLEEN HOLZKNECHT 02/08/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title EXECUTIVE DIRECTOR Title CD

NameHOLZKNECHT, CATHLEENNameMYERS, VERNONAddress113 SHELL TRAILAddress2500 FAIRWAY DRIVECity-State-Zip:SATSUMA FL 32189City-State-Zip:PALATKA FL 32177

Title VD Title SD

NameSIMS, LESNameCALDERON, CHRISTIANAddress640 PUTNAM COUNTY BLVDAddress104 OAK TREE LANECity-State-Zip:EAST PALATKA FL 32131City-State-Zip:PALATKA FL 32177

Title D Title D

Name REYNOLDS, KARI Name GABORIAU, SUSAN Address 640 WEST PENIEL ROAD Address 204 SW 51ST AVE

City-State-Zip: PALATKA FL 32177 City-State-Zip: INTERLACHEN FL 32148

Title D Title D

NamePAYNE, MARGIENamePARISH, LULU GAILAddress2700 FAIRWAY DRIVEAddress144 S OAKLAND AVECity-State-Zip:PALATKA FL 32177City-State-Zip:SAN MATEO FL 32187

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: CATHLEEN HOLZKNECHT EXECUTIVE DIRECTOR 02/08/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title D Title D

Name OLIVER, JOYCE Name KEYSER, TIMOTHY

Address 185 W RIVER ROAD Address 211 POINT IDA COURT
City-State-Zip: PALATKA FL 32177 City-State-Zip: INTERLACHEN FL 32148