

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

DOCUMENT# N25149

**Entity Name:** HILLSBOROUGH EDUCATION FOUNDATION, INC.**Current Principal Place of Business:**2306 N. HOWARD AVENUE  
TAMPA, FL 33607**Current Mailing Address:**2306 N. HOWARD AVENUE  
TAMPA, FL 33607**FEI Number:** 59-2883361**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**SUTTON, KEVIN H  
101 EAST KENNEDY BOULEVARD  
SUITE 3700  
TAMPA, FL 33602 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	DC
Name	JOHNSON, R. DUANE
Address	425 NORTH FLORIDA AVE
City-State-Zip:	TAMPA FL 33602
Title	D
Name	POLAND, MIKE
Address	401 EAST JACKSON ST SUITE 3700
City-State-Zip:	TAMPA FL 33602
Title	DT
Name	BRANNAN, JOHN
Address	611 MAGNOLIA AVENUE
City-State-Zip:	TAMPA FL 33606

Title	DP
Name	JONES, B. PHILIP JR.
Address	2306 N. HOWARD AVENUE
City-State-Zip:	TAMPA FL 33607
Title	DS
Name	TREMONTI, YVETTE
Address	12902 MAGNOLIA DR.
City-State-Zip:	TAMPA FL 33612
Title	D
Name	SUTTON, KEVIN H
Address	101 E. KENNEDY BLVD.
City-State-Zip:	TAMPA FL 33602

*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:** B. PHILIP JONES, JR.**PRESIDENT****02/25/2015**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date