

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28479

Entity Name: ACADEMIC EXCELLENCE FOUNDATION, INC.**Current Principal Place of Business:**425 WEST DAVIS BOULEVARD
TAMPA, FL 33606**Current Mailing Address:**425 WEST DAVIS BOULEVARD
TAMPA, FL 33606 US**FEI Number:** 65-0079619**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**VASH, DALE WESQ.
501 EAST KENNEDY BOULEVARD
SUITE 1700
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	DP&S
Name	DIETZ, ROBERT
Address	425 WEST DAVIS BLVD
City-State-Zip:	TAMPA FL 33606

Title	DVP
Name	GOETSCHIUS, HERB
Address	4117 SALTWATER BLVD.
City-State-Zip:	TAMPA FL 33615

Title	DT
Name	ROBERTO, ALBERT
Address	4419 CLOSE RIVER BLVD.
City-State-Zip:	VALRICO FL 33594

Title	D
Name	MARTIN, STEVE
Address	5401 WEST WATERS
City-State-Zip:	TAMPA FL

Title	D
Name	ERHARDT, BRUCE
Address	3904 KENWOOD AVENUE
City-State-Zip:	TAMPA FL 33611

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: ROBERT DIETZ

D,P, & S

03/23/2013

Electronic Signature of Signing Officer/Director Detail_____
Date