

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N32164

**Entity Name:** OKEECHOBEE EDUCATIONAL FOUNDATION, INC.

**Current Principal Place of Business:**

700 SW 2ND AVE  
OKEECHOBEE, FL 34974

**Current Mailing Address:**

700 SW 2ND AVE  
OKEECHOBEE, FL 34974 US

**FEI Number:** 65-0219235

**Certificate of Status Desired:** No

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

WHITEHEAD, DENISE  
1718 NW 9TH AVENUE  
OKEECHOBEE, FL 34972 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:** DENISE WHITEHEAD

01/13/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name HURLEY, MARY J  
Address 4390 SE 50 AVE  
City-State-Zip: OKEECHOBEE FL 34974

Title DIRECTOR  
Name CLEMENTS, DEBBIE  
Address PO BOX 363  
City-State-Zip: OKEECHOBEE FL 34973

Title DIRECTOR  
Name BROWN, RUSS  
Address 2229 NW 9TH AVE  
City-State-Zip: OKEECHOBEE FL 34972

Title DIRECTOR  
Name KENWORTHY, KEN  
Address 700 SW 2 AVENUE  
City-State-Zip: OKEECHOBEE FL 34974

Title DIRECTOR  
Name SABIN, JEFF  
Address 7700 S.E. BRIDGE ROAD  
City-State-Zip: HOBE SOUND FL 33455

Title DIRECTOR  
Name STANLEY, JOSEPH DR.  
Address 600 S.E. 26 DRIVE  
City-State-Zip: OKEECHOBEE FL 34974

Title PRESIDENT  
Name WHITEHEAD, DENISE  
Address 1718 NW 9TH AVENUE  
City-State-Zip: OKEECHOBEE FL 34972

Title DIRECTOR  
Name SYFRETT, LINDA  
Address 501 S.W. 28 TERRACE  
City-State-Zip: OKEECHOBEE FL 34974

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*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:** ERIN MOORE

**TREASURER**

01/13/2021

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title PARLIAMENTARIAN  
Name HOOKER, DEBORAH  
Address 401 NW 6 STREET  
City-State-Zip: OKEECHOBEE FL 34972

Title VP  
Name BISHOP, CHRISTINE DR.  
Address 6688 SW 21ST PKWY  
City-State-Zip: OKEEECHOBEE FL 34974

Title DIRECTOR  
Name HOLCOMB, JILL  
Address 700 SW 2ND AVE  
City-State-Zip: OKEECHOBEE FL 34974

Title DIRECTOR  
Name CHAPA, SONYA  
Address 206 SW 16TH STREET  
City-State-Zip: OKEECHOBEE FL 34974

Title TREASURER  
Name MOORE, ERIN  
Address 2721 N.E. 6 COURT  
City-State-Zip: OKEECHOBEE FL 34972

Title DIRECTOR  
Name STEPHEN, NOEL  
Address 23 NE 138 STREET  
City-State-Zip: OKEECHOBEE FL 34972

Title SECRETARY  
Name TEWKSBURY, JENNIFER  
Address 1679 NW 9TH STREET  
City-State-Zip: OKEECHOBEE FL 34972

Title DIRECTOR  
Name LUNDY, LESLIE  
Address 209 NW 9TH STREET  
City-State-Zip: OKEECHOBEE FL 34972