

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32164

FILED
Mar 21, 2017
Secretary of State
CC9296954144

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:

HURLEY, MARY J
4390 S.E. 50 AVENUE
OKEECHOBEE, FL 34974 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: MARY J HURLEY

03/21/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

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

Title DIRECTOR
Name HOOVER, DAWN
Address 1949 SW 67 DRIVE
City-State-Zip: OKEECHOBEE FL 34974

Title DIRECTOR
Name CLEMENTS, DEBBIE
Address 458 HWY. 98 NORTH
City-State-Zip: OKEECHOBEE FL 34972

Title DIRECTOR
Name BROWN, RUSS
Address 2136 NE 54 WAY
City-State-Zip: OKEECHOBEE FL 34972

Title DIRECTOR
Name COOPER, PATRICIA DR.
Address 267 S.W. 77 TERRACE
City-State-Zip: OKEECHOBEE FL 34974

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

Title DIRECTOR
Name OWENS, KELLY
Address 13075 SE 34 STREET
City-State-Zip: OKEECHOBEE FL 34974

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

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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

03/21/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

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

Title DIRECTOR
Name WATFORD, CELESTE
Address 307 N.W. 5 AVENUE
City-State-Zip: OKEECHOBEE FL 34972

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

Title PARLIAMENTARIAN, DIRECTOR
Name HOOKER, DEBORAH
Address 401 N.W. 6 STREET
City-State-Zip: OKEECHOBEE FL 34972

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

Title VP, DIRECTOR
Name TRENT, TABITHA
Address 2100 S. PARROTT AVENUE
City-State-Zip: OKEECHOBEE FL 34974

Title DIRECTOR
Name WHITEHEAD, DENISE
Address 800 N. PARROTT AVENUE
City-State-Zip: OKEECHOBEE FL 34972

Title DIRECTOR
Name RAULERSON, PHOEBE
Address 3898 N.W. 144 DRIVE
City-State-Zip: OKEECHOBEE FL 34972

Title T
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