

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33477

Entity Name: THE HARDEE COUNTY EDUCATION FOUNDATION,
INCORPORATED**Current Principal Place of Business:**1009 N 6TH AVE
WAUCHULA, FL 33873**Current Mailing Address:**PO BOX 1678
WAUCHULA, FL 33873**FEI Number: 59-2969193****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WARD, CALLI
3103 SASSER RD
ZOLFO SPRINGS, FL 33890 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:** CALLI WARD**02/07/2019**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	P
Name	WARD, CALLI
Address	3103 SASSER RD
City-State-Zip:	ZOLFO SPRINGS FL 33890

Title	VP
Name	LANIER, ARNOLD
Address	900 E SUMMIT STREET
City-State-Zip:	WAUCHULA FL 33873

Title	S
Name	COLLINS, SYLVIA
Address	502 E MAIN ST
City-State-Zip:	WAUCHULA FL 33873

Title	D
Name	SEE JR, JAMES V
Address	206 N 6TH AVENUE
City-State-Zip:	WAUCHULA FL 33873

Title	T
Name	GIBBS, FRANK
Address	980 OLD BRADENTON RD
City-State-Zip:	WAUCHULA FL 33873

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: CALLI WARD**PRESIDENT****02/07/2019**

Electronic Signature of Signing Officer/Director Detail

Date