## 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47150

Entity Name: MADISON COUNTY FOUNDATION FOR EXCELLENCE IN

EDUCATION, INC.

**Current Principal Place of Business:** 

121 NE. RANGE AVE. MADISON, FL 32340

**Current Mailing Address:** 

**PO BOX 181** 

MADISON, FL 32341-1027

FEI Number: 59-3112453 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HARDEE, CARY A. 215 S.E. PINCKNEY ST. MADISON, FL 32340-0450 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

**FILED** Jan 10, 2015

**Secretary of State** 

CC6703750003

Officer/Director Detail:

Title TD Title D

Name CAVE, MONTEEN M Name WILLIS, GEORGE M

Address 1778 HW 90 WEST Address PINE RIDGE RANCH, HWY 6

City-State-Zip: MADISON FL 32340 City-State-Zip: MADISON FL 32340

Title PD Title **DIRECTOR** 

SANDERS, TIM Name BROWNING, FAYE Name

230 SW MEETING AVE. Address 3275 NE COLIN KELLY HIGHWAY Address City-State-Zip: MADISON FL 32340

City-State-Zip: MADISON FL 32340

Title D

Name MERCER, FRANCES 3012 NE CR 255 Address City-State-Zip: LEE FL 32059

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: MONTEEN M. CAVE

Electronic Signature of Signing Officer/Director Detail

**TREASURER** 

01/10/2015