

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000002934

FILED
Jan 25, 2013
Secretary of State
CC2003491983

Entity Name: THE DESOTO COUNTY EDUCATION FOUNDATION, INC.

Current Principal Place of Business:

530 LASOLONA AVE
ARCADIA, FL 34266

Current Mailing Address:

POST OFFICE DRAWER 2000
ARCADIA, FL 34265

FEI Number: 59-3533706

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

KIRKPATRICK, JUDY
128 SOUTH BREVARD AVENUE
ARCADIA, FL 34266 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: JUDY KIRKPATRICK

01/25/2013

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title O
Name BROWN, BETTY
Address 937 WEST OAK STREET
City-State-Zip: ARCADIA FL 34266

Title O
Name BARNWELL, MELBA R
Address POST OFFICE BOX 525
City-State-Zip: FORT OGDEN FL 34265

Title D
Name HACKNEY, BILL
Address 504 EAST OAK STREET
City-State-Zip: ARCADIA FL 34266

Title D
Name MARKEY, KEITH
Address POST OFFICE BOX 1013
City-State-Zip: ARCADIA FL 34265

Title D
Name BOWERS, RICHARD
Address 1937 SW HENDRY STREET
City-State-Zip: ARCADIA FL 34266

Title O
Name RYALS, ANN
Address P.O. BOX 127
City-State-Zip: FORT OGDEN FL 34267

Title DIRECTOR
Name SYMONS, PAT
Address POST OFFICE BOX 1863
City-State-Zip: ARCADIA FL 34265

Title DIRECTOR
Name KIRKPATRICK, JUDY
Address 128 SOUTH BREVARD AVENUE
City-State-Zip: ARCADIA FL 34266

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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: MELBA BARNWELL

OFFICER

01/25/2013

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name PLYMALE, NANCY
Address 1503 NORTH ARCADIA AVENUE
City-State-Zip: ARCADIA FL 34266