2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000002934

Entity Name: THE DESOTO COUNTY EDUCATION FOUNDATION, INC.

FILED
Mar 09, 2023
Secretary of State
8758360423CC

Current Principal Place of Business:

3375 NW COUNTY ROAD 661A ARCADIA. FL 34266

Current Mailing Address:

POST OFFICE BOX 1903 ARCADIA, FL 34265 US

FEI Number: 59-3533706 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BURNS, MARY K 3662 NW CR661A 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: MARY KAY BURNS 03/09/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

TitleTREASURERTitleDIRECTORNameHACKNEY, WILLIAM A JR.NameRYALS, ANNAddress504 EAST OAK STREETAddressP.O. BOX 127

City-State-Zip: ARCADIA FL 34266 City-State-Zip: FORT OGDEN FL 34267

Title DIRECTOR Title VC

Name HEINE, AMY Name WOMACK, TERRI

Address 1615 SE FORD TERRACE Address 3220 SE MONTGOMERY CIRCLE

City-State-Zip: ARCADIA FL 34266 City-State-Zip: ARCADIA FL 34266

Title SECRETARY Title CHAIRMAN

NameMARKEY, MARTHA JNameNEDLEY, HEATHERAddress2978 SE CREKWOOD TERRACEAddress222 EAST OAK STREET

City-State-Zip: ARCADIA FL 34266 City-State-Zip: ARCADIA FL 34266

TitleDIRECTORTitleDIRECTORNameVOWELS, TIMNameWALKER, SARA

Address 1806 S.E. KING STREET Address POST OFFICE BOX 1903
City-State-Zip: ARCADIA FL 34266 City-State-Zip: ARCADIA FL 34265

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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: WILLIAM A. HACKNEY JR.

TREASURER

03/09/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name ALLI, KELLI Name BAUTISTA, ERIC

Address POST OFFICE BOX 1903 Address 216 N. VLOUSIA AVE.

City-State-Zip: ARCADIA FL 34265 City-State-Zip: ARCADIA FL 34266