

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003423

Entity Name: A GIFT FOR TEACHING, INC.**Current Principal Place of Business:**6501 MAGIC WAY
BLDG. 400C
ORLANDO, FL 32809**Current Mailing Address:**6501 MAGIC WAY
BLDG. 400C
ORLANDO, FL 32809 US**FEI Number:** 59-3515162**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**THOMPSON, JANE
6501 MAGIC WAY
BLDG. 400C
ORLANDO, FL 32809 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

Officer/Director Detail :

Title	P
Name	THOMPSON, JANE
Address	6501 MAGIC WAY BLDG 400 C
City-State-Zip:	ORLANDO FL 32809

Title	DIRECTOR
Name	THIELHELM, ROBERT W
Address	200 S. ORANGE AVENUE SUITE 2300
City-State-Zip:	ORLANDO FL 32801

Title	DIRECTOR, CHAIRMAN
Name	HAIR, JIM
Address	201 S. ORANGE AVENUE SUITE 940
City-State-Zip:	ORLANDO FL 32801

Title	DIRECTOR, SECRETARY
Name	BUSTOS, ED
Address	1000 HOLT AVENUE #2720
City-State-Zip:	WINTER PARK FL 32789

Title	DIRECTOR, VICE CHAIR
Name	COLLINS, CHERYL A
Address	DENVER DRIVE
City-State-Zip:	ORLANDO FL 32812

Title	DIRECTOR
Name	LOMAS, JORDAN
Address	1000 DARDEN CENTER DRIVE
City-State-Zip:	ORLANDO FL 32837

Title	DIRECTOR, TREASURER
Name	CHATTIN, RICK
Address	20 NORTH ORANGE AVENUE
City-State-Zip:	ORLANDO FL 32801

Title	DIRECTOR, VC
Name	GARCIA, LILLIAN
Address	14901 S. ORANGE BLOSSOM TRAIL
City-State-Zip:	ORLANDO FL 32837

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: JANE THOMPSON**PRESIDENT****01/28/2019**

Electronic Signature of Signing Officer/Director Detail

Date