

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N99000006835

**Entity Name:** FLORIDA ASSOCIATION OF INTERNATIONAL EDUCATORS, INC.

**FILED**  
**Feb 17, 2017**  
**Secretary of State**  
**CC2583837863**

**Current Principal Place of Business:**

11000 UNIVERSITY PKWY.  
INTERNATIONAL CENTER, BUILDING 71, ROOM 147  
PENSACOLA, FL 32514

**Current Mailing Address:**

11000 UNIVERSITY PARKWAY  
INTERNATIONAL CENTER, BUILDING 71, ROOM 147  
PENSACOLA, FL 32514 US

**FEI Number: 59-3641239**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

HENDRIX, RACHEL L  
UNIVERSITY OF WEST FLORIDA  
11000 UNIVERSITY PKWY, BLDG. 71  
PENSACOLA, FL 32514 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: RACHEL L HENDRIX**

**02/17/2017**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title CHAIR  
Name HENDRIX, RACHEL  
Address UNIVERSITY OF WEST FLORIDA  
11000 UNIVERSITY PKWY. BLDG 71  
INTERNATIONAL CENTER, BUILDING  
71, ROOM 147  
City-State-Zip: PENSACOLA FL 32514

Title CHAIR-ELECT  
Name PARRA, ALEJANDRA DR.  
Address NOVA SOUTHEASTERN UNIVERSITY  
3301 COLLEGE AVENUE  
City-State-Zip: FT. LAUDERDALE FL 33314

*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: RACHEL HENDRIX**

**CHAIR**

**02/17/2017**

Electronic Signature of Signing Officer/Director Detail

Date