# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Feb 28, 2011**
**Secretary of State**

DOCUMENT# 708122

**Entity Name:** HEART OF FLORIDA EDUCATIONAL FOUNDATION, INC.

**Current Principal Place of Business:**

1101 FIRST STREET SOUTH
WINTER HAVEN, FL 33880 US

**New Principal Place of Business:**

**Current Mailing Address:**

1101 FIRST STREET SOUTH
WINTER HAVEN, FL 33880 US

**New Mailing Address:**

**FEI Number: 59-6159367** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

DODD, ROBERT E
1101 FIRST STREET SOUTH
WINTER HAVEN, FL 33880 US

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

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

**OFFICERS AND DIRECTORS:**

Title: CT
Name: DODD, ROBERT E
Address: 228 CREST DRIVE
City-St-Zip: HAINES CITY, FL 33844

Title: TT
Name: PINNER, ERNEST S
Address: 54 PINE FOREST DRIVE
City-St-Zip: HAINES CITY, FL 33844

Title: T
Name: FINNEGAN, JAY
Address: 40100 US HIGHWAY 27 NORTH
City-St-Zip: DAVENPORT, FL 33837

Title: T
Name: BROADWAY, DENNIS
Address: P.O. BOX 337
City-St-Zip: HAINES CITY, FL 338450337

Title: T
Name: STANGRY, THERON
Address: 222 STATE ROAD 60 EAST
City-St-Zip: LAKE WALES, FL 33853

Title: ST
Name: ROCKER, J THOMAS
Address: 2740 SEQUOYAH DRIVE
City-St-Zip: HAINES CITY, FL 33844

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: ROBERT E. DODD CT 02/28/2011

Electronic Signature of Signing Officer or Director Date