

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morlham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **709880** (9)
1. Corporation Name
F & F EDUCATORS, INC.



Principal Place of Business: 305 SOUTH WETMORE STREET, P.O. BOX 432, LAKE WALES FL 33859-7432
Mailing Address: 305 SOUTH WETMORE STREET, P.O. BOX 432, LAKE WALES FL 33859-7432

3. Date Incorporated or Qualified: 11/05/1965
3a. Date of Last Report: 03/28/1995
4. FEI Number: 59-0212268
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business (21) Suite, Apt. #, etc. (22) City & State (23) Zip (24) Country (25)
2a. Mailing Address (26) Suite, Apt. #, etc. (27) City & State (28) Zip (29) Country (30)

9. Name and Address of Current Registered Agent

**BROWNING, HELEN R.
4910 LAKE PIERCE DRIVE
LAKE WALES FL 33853**

10. Name and Address of New Registered Agent

81 Name: **Helen R. Higgins**
82 Street Address (P.O. Box Number is Not Acceptable): **4910 Lake Pierce Drive**
83
84 City: **Lake Wales,** FL 85 Zip Code: **33853**

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: *Helen R. Higgins* **Helen R. Higgins** DATE: **3/19/96**

12. OFFICERS AND DIRECTORS

TITLE	DVP	<input checked="" type="checkbox"/> DELETE
NAME	KOHL, THOMAS E.	
STREET ADDRESS	ONE SCENIC CENTRAL	
CITY-ST-ZIP	LAKE WALES FL	
TITLE	DP	<input type="checkbox"/> DELETE
NAME	BROWNING, HELEN R.	
STREET ADDRESS	4910 LAKE PIERCE DR.	
CITY-ST-ZIP	LAKE WALES FL	
TITLE	DST	<input type="checkbox"/> DELETE
NAME	SHRIVER, REBECCA	
STREET ADDRESS	305 SO. WETMORE	
CITY-ST-ZIP	LAKE WALES FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	DVP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Linda L. Browning	
1.3 STREET ADDRESS	305 S. Wetmore Street	
1.4 CITY-ST-ZIP	Lake Wales, FL 33853	
2.1 TITLE	DP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Higgins, Helen R.	
2.3 STREET ADDRESS	4910 Lake Pierce Drive	
2.4 CITY-ST-ZIP	Lake Wales, FL 33853	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Helen R. Higgins* **Helen R. Higgins** DATE: **3/19/96** DAYTIME PHONE: **941/676-1001**

CR2E037 (12/95)