2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2009
Secretary of State

DOCUMENT# 713325

Entity Name: FLORIDA INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS' EDUCATIONAL FOUNDATION, INC.

Current Principal Place of Business:

325 W COLLEGE AVE
TALLAHASSEE, FL 32301 US

New Principal Place of Business:

Current Mailing Address:

325 W COLLEGE AVE
TALLAHASSEE, FL 32301 US

New Mailing Address:

FEI Number: 59-6152454 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ANDERSON, KATHRYN B
325 W COLLEGE AVE
TALLAHASSEE, FL 32301 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:	P	( ) Delete
Name:	THOMAS, MARIA A	
Address:	215 CELEBRATION PL, SUITE 170	
City-St-Zip:	CELEBRATION, FL 34747	
Title:	EP	( ) Delete
Name:	WILKINSON, JOHN F JR	
Address:	611 S. MAGNOLIA AVE.	
City-St-Zip:	TAMPA, FL 33606 US	
Title:	V	( ) Delete
Name:	BURNER, BARBARA A	
Address:	2060 PALM BAY RD, NE, SUITE 1	
City-St-Zip:	PALM BAY, FL 32905 US	
Title:	V	( ) Delete
Name:	KANE, MONTE	
Address:	1101 BRICKELL AVENUE STUIE M101	
City-St-Zip:	MIAMI, FL 33131 US	
Title:	S/T	( ) Delete
Name:	ANDERSON, KATHRYN B	
Address:	325 W. COLLEGE AVENUE	
City-St-Zip:	TALLAHASSEE, FL 32301 US	
Title:	V	(X) Delete
Name:	GREENE, JEFFREY H	
Address:	128 LAUREL ROAD	
City-St-Zip:	HOLLYWOOD, FL 33021 US	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	P	(X) Change ( ) Addition
Name:	WILKINSON, JOHN F JR	
Address:	611 S. MAGNOLIA AVE.	
City-St-Zip:	TAMPA, FL 33606 US	
Title:	EP	(X) Change ( ) Addition
Name:	KANE, MONTE E	
Address:	1101 BRICKELL AVENUE SUITE M101	
City-St-Zip:	MIAMI, FL 33131 US	
Title:	V	(X) Change ( ) Addition
Name:	GREENE, JEFFREY H	
Address:	128 LAUREL ROAD	
City-St-Zip:	HOLLYWOOD, FL 33021 US	
Title:	V	(X) Change ( ) Addition
Name:	MARGOLIS, GARY J	
Address:	7369 SHERIDAN STREET SUITE 201	
City-St-Zip:	HOLLYWOOD, FL 33024 US	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JOHN F WILKINSON, JR P 04/10/2009

Electronic Signature of Signing Officer or Director — Date