

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 715453

FILED
Jan 28, 2009
Secretary of State

Entity Name: FLORIDA KINDERGARTEN COUNCIL, INC.

Current Principal Place of Business:

SUITE 612, INTERSTATE BUILDING
1211 NORTH WESTSHORE BOULEVARD
TAMPA, FL 33607

New Principal Place of Business:

1211 NORTH WESTSHORE BOULEVARD
SUITE 612
TAMPA, FL 33607

Current Mailing Address:

SUITE 612, INTERSTATE BUILDING
1211 NORTH WESTSHORE BOULEVARD
TAMPA, FL 33607

New Mailing Address:

1211 NORTH WESTSHORE BOULEVARD
SUITE 612
TAMPA, FL 33607

FEI Number: 59-1910278

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOOD, DONNA
604 DUNBLANE DR.
WINTER PARK, FL 32792 US

Name and Address of New Registered Agent:

NAFE, ELLEN
12606 CASEY RD
TAMPA, FL 33618 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: ELLEN NAFE

01/28/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GLUHM, CHERIE
Address: 8141 COLLEGE PKWY
City-St-Zip: FORT MYERS, FL 33919

Title: VP () Delete
Name: NAFE, ELLEN
Address: 12606 CASEY RD
City-St-Zip: TAMPA, FL 33624

Title: D () Delete
Name: DELOACH, DEBBIE
Address: 901 N. HIGHLAND AVE.
City-St-Zip: ORLANDO, FL 32803

Title: VDP () Delete
Name: LARKIN, JAMES
Address: 2418 SWANN AVE
City-St-Zip: TAMPA, FL 33688

Title: SD (X) Delete
Name: GASTON, KATHY
Address: 7715 SW 14 AVENUE
City-St-Zip: GAINESVILLE, FL 32607

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: NAFE, ELLEN
Address: 12606 CASEY RD
City-St-Zip: TAMPA, FL 33618

Title: VP (X) Change () Addition
Name: MORROW, LOUISE
Address: 10063 BAYMEADOWS RD
City-St-Zip: JACKSONVILLE, FL 32256

Title: T (X) Change () Addition
Name: LARKIN, JAMES
Address: 2418 SWANN AVE
City-St-Zip: TAMPA, FL 33609

Title: IMP (X) Change () Addition
Name: GLUHM, CHERIE
Address: 8141 COLLEGE PARKWAY
City-St-Zip: FORT MYERS, FL 33919

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: LOUISE MORROW

VP

01/28/2009

Electronic Signature of Signing Officer or Director

Date