

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 720252

FILED
Feb 08, 2011
Secretary of State

Entity Name: STETSON BUSINESS SCHOOL FOUNDATION INC

Current Principal Place of Business:

CAMPUS BOX 8398 STETSON UNIV.
421 N. WOODLAND BLVD
DELAND, FL 32723 US

New Principal Place of Business:

Current Mailing Address:

CAMPUS BOX 8398 STETSON UNIV.
421 N. WOODLAND BLVD
DELAND, FL 32723 US

New Mailing Address:

FEI Number: 23-7138942

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STRYKER, JUDSON P
951 ROLLING ACRES DRIVE
DELAND, FL 32720 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: SD
Name: MICHELSON, STUART E
Address: 5680 S. LAKE BURKETT LANE
City-St-Zip: WINTER PARK, FL 32792

Title: TD
Name: STRYKER, JUDSON P
Address: 951 ROLLING ACRES DR
City-St-Zip: DELAND, FL 32720

Title: D
Name: LANKFORD, CANDACE
Address: 330 LAKE WINNEMISSETT DR
City-St-Zip: DELAND, FL 32724

Title: PD
Name: BOND, JAY D JR
Address: 1428 N. HALIFAX AVENUE
City-St-Zip: DAYTONA BEACH, FL 32118

Title: VPD
Name: MONK, DAVID A
Address: 407 S. CENTER STREET
City-St-Zip: DELEON SPRINGS, FL 32180

Title: ATD
Name: SHIERLING, GEORGE E
Address: 3470 TRAIL IN THE PINES
City-St-Zip: DELAND, FL 32724

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: JUDSON P. STRYKER

TD

02/08/2011

Electronic Signature of Signing Officer or Director

_____ Date