## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT #739350**



Apr 20, 2006 8:00 am Secretary of State 04-20-2006 90177 006 \*\*\*\*61.25

**FILED** 

1. Entity Name FLORIDA HOLDING	EDUCATION ASSOCIATION CORPORATION, INC.	N ASSOCIATIO	NC								
Principal Place 213 S. ADAM TALLAHASSE	IS STREET	Mailing Address 213 S. ADAMS S TALLAHASSEE, F					:				
2. Principal Pl	lace of Business	3. Mailing Address									
Suite, Apt. #, etc. Su		Suite, Apt. #, e	Suite, Apt. #, etc.			03082006 <sub>Ci</sub>	hg-NP	CR2E037	(11/05)		
City & State Cit		City & State	ity & State		-	4. FEI Number 59-184367	<b>'</b> 4		_	plied For t Applicable	
Zip	Country	Zip	Cod	untry		5. Certificate of St	tatus Desired		8.75 Add e Required		
	6. Name and Address of Current	Registered Agent				7. Name and Add	Iress of New Re	istered Ag	ent		
	, (~)			Name							
MEYER, RONALD G ESQUIRE 2544 BLAIRSTONE PINES DRIVE TÁLLAHASSEE, FL 32301				Street Address (P.O. Box Number is Not Acceptable)							
,				City				FL	Zip Code	•	
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28. 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. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE  Filling Fee Is \$61.25  9. Election Campaign Financing \$5.00 May Re.  Make check payable to											
						-	Ma	ke check r	navable to		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

allace

4-10-06

222-4767