


**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 29, 2008 8:00 am**  
**Secretary of State**

02-29-2008 90022 040 \*\*\*\*61.25

**DOCUMENT # 739350**

1. Entity Name  
**FLORIDA EDUCATION ASSOCIATION HOLDING CORPORATION, INC.**



Principal Place of Business  
**213 S. ADAMS STREET  
 TALLAHASSEE, FL 32301**

Mailing Address  
**213 S. ADAMS STREET  
 TALLAHASSEE, FL 32301**

**40035780**



2. Principal Place of Business - No P.O. Box #  
 Suite, Apt. #, etc.

3. Mailing Address  
 Suite, Apt. #, etc.

02042008 Chg-NP CR2E037 (12/06)

City & State

4. FEI Number  
**59-1843674**

Applied For  
 Not Applicable

Zip Country Zip Country

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**MEYER, RONALD G ESQUIRE  
 2544 BLAIRSTONE PINES DRIVE  
 TALLAHASSEE, FL 32301**

**7. Name and Address of New Registered Agent**

Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City **FL** Zip Code

8. 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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.)

**Filing Fee is \$61.25  
 Due by May 1, 2008**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

**Make check payable to Florida Department of State**

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP FORD, ANDY 213 SOUTH ADAMS STREET TALLAHASSEE, FL 32301	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP MCCALL, JOANNE 9340 CR 125-B WILDWOOD, FL 34785	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DUKES, JUDY 428 NORTH BROADWAY ST. WILDWOOD, FL 34785	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP COOK, CLARA 213 S. ADAMS STREET TALLAHASSEE, FL 32301	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TILLMAN, VANESSA 805 VIRGINIA ST #15 FORT PIERCE, FL 34982	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CAPOZIELLO, MARIANNE 703 EAST DAVIDSON ST BARTOW, FL 33830	<input checked="" type="checkbox"/> Delete

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10**

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/S/T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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.

**SIGNATURE:** Aaron Wallace Aaron Wallace 2/12/08 850-222-4767  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

# ATTACHMENT

40035780  
# 139358

FLORIDA EDUCATION ASSOCIATION HOLDING CORPORATION,  
INC.

DOCUMENT #739350

2008 Not-For-Profit Corporation

Uniform Business Report

## 10. Officers & Directors (Continued)

Title D  
Name Aaron Wallace  
Street Address 213 S. Adams Street  
City State Zip Tallahassee, FL 32301

Title D **DELETE**  
Name Roy Weatherford  
Street Address 5425 County Road 579  
City State Zip Seffner, FL 33584

Title D **DELETE**  
Name Gilda Morgan-Williams  
Street Address 1459 N. Mangonia Circle  
City State Zip West Palm Beach, FL 33401

Title D **DELETE**  
Name Constance Higginbotham  
Street Address 6202 Bahama Court  
City State Zip Orange Park, FL 32073

Title D **DELETE**  
Name George Williams  
Street Address P. O. Box 368  
City State Zip Madison, FL 32341

Title D **DELETE**  
Name Jeff Siskind  
Street Address 389 1/2 Clermont Road  
City State Zip Lake Mary, FL 32124