2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2012
Secretary of State

DOCUMENT# 743136

Entity Name: FLORIDA ALLIANCE FOR ARTS EDUCATION, INC.

Current Principal Place of Business:

11410 SWIFT WATER CIRCLE
ORLANDO, FL 32817 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 782050
ORLANDO, FL 328782050 US

New Mailing Address:

FEI Number: 59-2563990 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PALMER, MARY J
11410 SWIFT WATER CIRCLE
ORLANDO, FL 32817 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: TD
Name: PALMER, MARY S
Address: 11410 SSWIFT WATER CIRCLE
City-St-Zip: ORLANDO, FL 32817 US

Title: PD
Name: COOLIDGE, JENNIFER
Address: 600 N. WOODLAND BLVD
City-St-Zip: DELAND, FL 32720

Title: D
Name: PRITCHARD, SIBILLE
Address: 401 SOUTH CENTRAL AVENUE
City-St-Zip: OVIEDO, FL 32765

Title: D
Name: ELLSPERMANN, JAYNE
Address: 3733 SW 80TH AVENUE
City-St-Zip: OCALA, FL 34481

Title: D
Name: PEARSON, TOM
Address: PALM BEACH COUNTY SCHOOLS
City-St-Zip: WEST PALM BEACH, FL 33402

Title: D
Name: LONG, SHERRON
Address: P O BOX 2131
City-St-Zip: WEST PALM BEACH, FL 33402

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: SUSAN BURKE ED 04/30/2012

Electronic Signature of Signing Officer or Director — Date