

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755851

FILED
Apr 24, 2009
Secretary of State

Entity Name: DAVIE/COOPER CITY EDUCATIONAL FOUNDATION, INC.

Current Principal Place of Business:

4185 S W 64TH AVE
DAVIE, FL 33314

New Principal Place of Business:

Current Mailing Address:

4185 S W 64TH AVE
DAVIE, FL 33314

New Mailing Address:

FEI Number: 59-2063682

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARTMAN, BRADLEY S
4185 DAVIE RD.
DAVIE, FL 33314 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: P () Delete
Name: KOVAC, JOAN
Address: 4185 S W 64TH AVE
City-St-Zip: DAVIE, FL 33314

Title: TS () Delete
Name: GILL, TOM
Address: 4185 S W 64TH AVE
City-St-Zip: DAVIE, FL 33314

Title: D () Delete
Name: MCCARTNEY, SHELDON
Address: 4185 S W 64TH AVE
City-St-Zip: DAVIE, FL 33314

Title: D () Delete
Name: BLANTON, KATHY
Address: 4185 DAVIE RD.
City-St-Zip: DAVIE, FL 33314

Title: D () Delete
Name: MILLER, ROBERT
Address: 4185 S W 64TH AVE
City-St-Zip: DAVIE, FL 33314

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: MARINO, VINCENT
Address: 4185 DAVIE RD.
City-St-Zip: DAVIE, FL 33314

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: TOM GILL

TS

04/24/2009

Electronic Signature of Signing Officer or Director

_____ Date