

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755851

FILED  
Feb 04, 2011  
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  
Name: KOVAC, JOAN  
Address: 4185 S W 64TH AVE  
City-St-Zip: DAVIE, FL 33314

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

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

Title: D  
Name: BLAUT, JARED  
Address: 4185 DAVIE RD.  
City-St-Zip: DAVIE, FL 33314

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

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: TOM GILL

TS

02/04/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date