2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 14, 2009
Secretary of State

DOCUMENT# 758348

Entity Name: FLORIDA ASSOCIATION OF POSTSECONDARY SCHOOLS AND COLLEGES, INC.

Current Principal Place of Business:

150 SOUTH MONROE STREET
SUITE 303
TALLAHASSEE, FL 32301 US

New Principal Place of Business:

Current Mailing Address:

150 SOUTH MONROE STREET
SUITE 303
TALLAHASSEE, FL 32301 US

New Mailing Address:

FEI Number: 59-2444267 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MIZERECK, KATHRYN K
150 SOUTH MONROE STREET
SUITE 303
TALLAHASSEE, FL 32301 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: SLAYTER, DON
Address: 8711 LONE STAR ROAD
City-St-Zip: JACKSONVILLE, FL 32765

Title: PP ( ) Delete
Name: WADE, MELISSA
Address: 2001 WEST SAMPLE ROAD
City-St-Zip: POMPANO BEACH, FL 33064

Title: T ( ) Delete
Name: AMOR, ALEX
Address: 5555 WEST FLAGLER STREET
City-St-Zip: MIAMI, FL 33134

Title: S ( ) Delete
Name: SLATER, WAYNE
Address: 4424 BEE RIDGE ROAD
City-St-Zip: SARASOTA, FL 34223

Title: PE ( ) Delete
Name: POLMEAR, WILLIAM
Address: 17910 SHELTERED RIDGE LANE
City-St-Zip: TAMPA, FL 33647

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PP (X) Change ( ) Addition
Name: SLAYTER, DON
Address: 8711 LONE STAR ROAD
City-St-Zip: JACKSONVILLE, FL 32211 US

Title: T (X) Change ( ) Addition
Name: SCHOONMAKER, JANIS
Address: 3012 US HIGHWAY 301 NORTH, STE. 1000
City-St-Zip: TAMPA, FL 33619 US

Title: S (X) Change ( ) Addition
Name: BARTNESS, DEAN
Address: 3383 NORTH STATE ROAD 7
City-St-Zip: LAUDERDALE LAKES, FL 33319 US

Title: PE (X) Change ( ) Addition
Name: SLATER, WAYNE
Address: 7020 PROFESSIONAL PARKWAY EAST
City-St-Zip: SARASOTA, FL 34240

Title: P (X) Change ( ) Addition
Name: POLMEAR, WILLIAM
Address: 10002 HAMPTON PLACE
City-St-Zip: TAMPA, FL 33618

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: KATHRYN K. MIZERECK ED 01/14/2009

Electronic Signature of Signing Officer or Director — Date