

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 758348

FILED
Jan 04, 2010
Secretary of State

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: PP
Name: POLMEAR, BILL
Address: 10002 HAMPTON PLACE
City-St-Zip: TAMPA, FL 33618 US

Title: T
Name: BARTNESS, DEAN
Address: 3401 NW 7TH STREET
City-St-Zip: MIAMI, FL 33125 US

Title: S
Name: BENJAMIN, ARTHUR
Address: 6351 BOULEVARD 26, SUITE 200
City-St-Zip: NORTH RICHLAND HILLS, TX 76180 US

Title: PE
Name: SCHOONMAKER, JANIS
Address: 3012 US HIGHWAY 301 NORTH, SUITE 1000
City-St-Zip: TAMPA, FL 33619

Title: P
Name: SLATER, WAYNE
Address: 7020 PROFESSIONAL PARKWAY, EAST
City-St-Zip: SARASOTA, FL 34240

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: KATHRYN K. MIZERECK

ED

01/04/2010

Electronic Signature of Signing Officer or Director

Date