

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 758565

FILED
Mar 30, 2007
Secretary of State

Entity Name: FLORIDA COUNCIL FOR EXCEPTIONAL CHILDREN, INC.

Current Principal Place of Business:

6507 GRAZING LANE
ODESSA, FL 33556 US

New Principal Place of Business:

Current Mailing Address:

6507 GRAZING LANE
ODESSA, FL 33556 US

New Mailing Address:

FEI Number: 59-2171083

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HORNBuckle, KAY D
6507 GRAZING LANE
ODESSA, FL 33556 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: PRES () Delete
Name: MOEDER-CHRISTENSEN, KATHY
Address: 280 19TH AVE S
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: PREL () Delete
Name: EZELL, DAN
Address: 1661 SILVERADO DRIVE
City-St-Zip: ROCKLEDGE, FL 32955

Title: TREA () Delete
Name: HORNBuckle, KAY D
Address: 6507 GRAZING LANE
City-St-Zip: ODESSA, FL 33556

Title: SEC () Delete
Name: LOVELL, LAUREN
Address: 1225 SW 34TH TERR
City-St-Zip: CAPE CORAL, FL 33914

Title: VP () Delete
Name: KEEN, JUNE
Address: 798 WOOD AVE
City-St-Zip: PANAMA CITY, FL 32401

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: EZELL, DAN DR.
Address: 1661 SILVERADO DRIVE
City-St-Zip: ROCKLEDGE, FL 32955

Title: PREL (X) Change () Addition
Name: LOGUE, JUNE
Address: 798 WOOD AVE
City-St-Zip: PANAMA CITY, FL 32401

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

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

Title: VP (X) Change () Addition
Name: RANEY, JANET DR.
Address: 1953 FATIO ROAD
City-St-Zip: DELAND, FL 32720

I hereby certify that the information supplied with this filing does not qualify for the 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: K. D. HORNBuckle

TREA

03/30/2007

Electronic Signature of Signing Officer or Director

Date