2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000000350

FILED Jaņ 16, 2<u>00</u>9 Secretary of State

Entity Name: DELTA SIGMA DELTA EDUCATIONAL FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business:

11971 BRAMBLE COVE FORT MYERS, FL 33905

Current Mailing Address: New Mailing Address:

11971 BRAMBLE COVE FORT MYERS, FL 33905

FEI Number: 38-6089377 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HERTEL, DAVID E DR. 11971 BRAMBLE COVE US FORT MYERS, FL 33905

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PRES PRES (X) Change () Addition () Delete MOURINO, ARTHUR SFERRA, GEORGE DR. Name: Name: 8397 ARNOLD ROAD Address: 115 EAST 61ST ST. Address: City-St-Zip: MECHANICSVILLE, VA 23111 City-St-Zip: NEW YORK, NY 10065

Title: () Delete Title: (X) Change () Addition CAPIRANO, MEDICK Name: CAPIRANO, MEDICK DR. Name:

Address: 17 HENNIG DR. Address: 17 HENNIG DR. City-St-Zip: PITTSBURGH, PA 15236 City-St-Zip: PITTSBURGH, PA 15236

Title: STTR () Delete Title: STTR (X) Change () Addition HERTEL, DAVID E HERTEL, DAVID E DR. Name: Name:

11971 BRAMBLE COVE Address: 11971 BRAMBLE COVE Address: City-St-Zip: FORT MYERS, FL 33905 City-St-Zip: FORT MYERS, FL 33905

Title: **VPTR** () Delete Title: TR (X) Change () Addition Name: MAHAN, MICHAEL S Name: MAHAN, MICHAEL S DR.

Address: 19330 HWY 139 Address: 19330 HWY 139 City-St-Zip: BRIERFIELD, AL 35035 City-St-Zip: BRIERFIELD, AL 35035

Title: () Delete Title: (X) Change () Addition

SFERRA, GEORGE TINKLE, JAMES DR. Name: Name:

115 EAST 61ST ST. 21420 NE INTERLACHEN LANE Address: Address:

City-St-Zip: NEW YORK, NY 10021 City-St-Zip: FARIVIEW, OR 97024

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: DR. DAVID E. HERTEL SEC 01/16/2009