

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003400

FILED
Mar 11, 2010
Secretary of State

Entity Name: FLORIDA STATE UNIVERSITY SCHOOLS, INC.

Current Principal Place of Business:

3000 SCHOOL HOUSE ROAD
TALLAHASSEE, FL 32311

New Principal Place of Business:

Current Mailing Address:

3000 SCHOOL HOUSE ROAD
TALLAHASSEE, FL 32311

New Mailing Address:

FEI Number: 59-3726188

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

WICKER, LYNN A DR
3000 SCHOOL HOUSE RD
TALLAHASSEE, FL 32311 US

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: CHAI
Name: BROOME, ROBERT
Address: 3513 CARRINGTON DRIVE
City-St-Zip: TALLAHASSEE, FL 32303

Title: CO-C
Name: ROSS, JACKIE MS
Address: 565 RAWLS ROAD
City-St-Zip: TALLAHASSEE, FL 32312

Title: MEM
Name: WIER, BILL
Address: 8292 COLTER'S CROSSING
City-St-Zip: TALLAHASSEE, FL 32309

Title: MEM
Name: BRADLEY, ROBERT DR
Address: 657 FOREST LAIR
City-St-Zip: TALLAHASSEE, FL 32312

Title: SEC
Name: SEAY, LONNIE SGT
Address: 3797 CHANTICLEER COURT
City-St-Zip: TALLAHASSEE, FL 32311

Title: TREA
Name: HARRIS, KRISTIE MS
Address: 3456 DAYLILY LANE
City-St-Zip: TALLAHASSEE, FL 32308

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: DR. LYNN A. WICKER

DIRE

03/11/2010

Electronic Signature of Signing Officer or Director

Date