

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003914

FILED
Feb 15, 2009
Secretary of State

Entity Name: NASSAU COUNTY HOME EDUCATORS SUPPORT GROUP, INC.

Current Principal Place of Business:

86131 HOPPER LANE
YULEE, FL 32097

New Principal Place of Business:

Current Mailing Address:

86131 HOPPER LANE
YULEE, FL 32097

New Mailing Address:

FEI Number: 59-3657460

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOPPER, DEBORAH
86131 HOPPER LANE
YULEE, FL 32097 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: PD () Delete
Name: HOPPER, DEBORAH
Address: 86131 HOPPER LANE
City-St-Zip: YULEE, FL 32097

Title: D () Delete
Name: HOPPER, RICHARD
Address: 86131 HOPPER LANE
City-St-Zip: YULEE, FL 32097

Title: TD () Delete
Name: MCDONALD, JANE
Address: 94250 SUMMER BREEZE DR.
City-St-Zip: YULEE, FL 32097

Title: VP () Delete
Name: WHITAKER, BRETT
Address: 96091 NORTH SHORE DR.
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: SD () Delete
Name: REUTER, MICHELE
Address: 86515 WORTHINGTON DR
City-St-Zip: YULEE, FL 32097

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: TD (X) Change () Addition
Name: TAYLOR, TERESA
Address: 94072 SUMMER BREEZE DR.
City-St-Zip: FERNANDINA BEACH, FL 32034

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

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

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: DEBORAH HOPPER

PD

02/15/2009

Electronic Signature of Signing Officer or Director

Date