


**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 27, 2005 08:00 AM
Secretary of State

DOCUMENT # N00000004693 1. Entity Name FAMILY EDUCATION CENTER, INC.	
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Principal Place of Business

22 HIGHWAY 40 E
INGLIS, FL 34449

Mailing Address

22 HIGHWAY 40 E
INGLIS, FL 34449

DO NOT WRITE IN THIS SPACE



04212005 No Chg-NP

CR2E037 (10/03)

4. FEI Number

31-1721770

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

POULOS, GREGORY G
48 AZALEE AVENUE
INGLIS, FL 34449

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD PATERSON, WILLIAM B 10865 N. ALOHA POINT CRYSTAL RIVER, FL 34428
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TSD POULOS, GREGORY G 48 AZALEE AVENUE INGLIS, FL 34449
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD THOMPSON, PHILLIP 1001 HIGHWAY 40 E. INGLIS, FL 34449
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04/27/05-80114-015 61.25

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(g), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Gregory G. Poulos Gregory G. Poulos April 25, 2005 (352) 417-4800
SIGNATURE AND TYPED OR PRINTED NAME OF MAKING OFFICER OR DIRECTOR Date Daytime Phone #