2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2007
Secretary of State

DOCUMENT# N00000005959

Entity Name: THE EDC FOUNDATION FOR EDUCATION, INC.

Current Principal Place of Business:

301 EAST PINE STREET
SUITE 900
ORLANDO, FL 328012741

New Principal Place of Business:

Current Mailing Address:

301 EAST PINE STREET
SUITE 900
ORLANDO, FL 328012741

New Mailing Address:

FEI Number: 59-3679008 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BOBROFF, MICHAEL L
301 EAST PINE STREET
SUITE 900
ORLANDO, FL 328012741 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: CD ( ) Delete
Name: WEISS, ALLEN
Address: 301 EAST PINE STREET, SUITE 900
City-St-Zip: ORLANDO, FL 328012741

Title: VCD ( ) Delete
Name: KURTZ, DEAN
Address: 301 EAST PINE STREET, SUITE 900
City-St-Zip: ORLANDO, FL 328012741

Title: STD ( ) Delete
Name: JERNIGAN, DONALD L PH.D.
Address: 301 EAST PINE STREET SUITE 900
City-St-Zip: ORLANDO, FL 328012741

Title: P ( ) Delete
Name: GILLEY, RAYMOND
Address: 301 EAST PINE STREET SUITE 900
City-St-Zip: ORLANDO, FL 328012741

Title: VP ( ) Delete
Name: BOBROFF, MICHAEL L
Address: 301 EAST PINE STREET SUITE 900
City-St-Zip: ORLANDO, FL 328012741

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CD (X) Change ( ) Addition
Name: KURTZ, DEAN
Address: 301 EAST PINE STREET, SUITE 900
City-St-Zip: ORLANDO, FL 328012741

Title: VCD (X) Change ( ) Addition
Name: JERNIGAN, DONALD L PH.D
Address: 301 EAST PINE STREET, SUITE 900
City-St-Zip: ORLANDO, FL 328012741

Title: STD (X) Change ( ) Addition
Name: LEONHARDT, FREDERICK W
Address: 301 EAST PINE STREET SUITE 1400
City-St-Zip: ORLANDO, FL 328012741

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 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: MICHAEL L. BOBROFF VP 04/24/2007

Electronic Signature of Signing Officer or Director — Date