

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00573

FILED  
Apr 04, 2005  
Secretary of State

**Entity Name:** FLORIDA HEALTH CARE EDUCATION AND DEVELOPMENT FOUNDATION, INC.

**Current Principal Place of Business:**

307 W. PARK AVENUE  
TALLAHASSEE, FL 32301

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1459  
TALLAHASSEE, FL 32302

**New Mailing Address:**

**FEI Number:** 59-2506713

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PHELAN, WILLIAM J  
307 W. PARK AVENUE  
TALLAHASSEE, FL 32301 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: DC ( ) Delete  
Name: HALL, NANCY E  
Address: 304 SOUTH CITRUS AVENUE  
City-St-Zip: INVERNESS, FL 34452

Title: DT ( ) Delete  
Name: FRANKLIN, DEBORAH  
Address: 851 W LUMSDEN ROAD  
City-St-Zip: BRANDON, FL 33511

Title: DV ( ) Delete  
Name: SENA, DION  
Address: 1301 NE 104TH STREET  
City-St-Zip: MIAMI SHORES, FL 33138

Title: DS ( ) Delete  
Name: SYLVESTER, DAVID P  
Address: 411 NORTH DILLARD STREET  
City-St-Zip: WINTER GARDEN, FL 34787

Title: ED ( ) Delete  
Name: PHELAN, WILLIAM  
Address: 307 W. PARK AVENUE  
City-St-Zip: TALLAHASSEE, FL 32301

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DC (X) Change ( ) Addition  
Name: WILLINGHAM, NINA  
Address: 8104 TUTTLE AVENUE  
City-St-Zip: SARASOTA, FL 34243

Title: DT (X) Change ( ) Addition  
Name: MARSHALL, ANTHONY  
Address: 307 WEST PARK AVENUE  
City-St-Zip: TALLAHASSEE, FL 32301

Title: DV (X) Change ( ) Addition  
Name: SYLVESTER, DAVID  
Address: 411 NORTH DILLARD STREET  
City-St-Zip: WINTER GARDEN, FL 34787

Title: DS (X) Change ( ) Addition  
Name: FRANKLIN, DEBORAH  
Address: 851 WEST LUMSDEN ROAD  
City-St-Zip: BRANDON, FL 33511

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 Section 119.07(3)(i), 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: WILLIAM PHELAN

ED

04/04/2005

Electronic Signature of Signing Officer or Director

Date