

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000002405

FILED
Feb 17, 2010
Secretary of State

Entity Name: DIVISION ON CAREER DEVELOPMENT AND TRANSITION OF THE FLORIDA FEDERATION COUNCIL FOR EXCEPTIONAL CHILDREN, INC.

Current Principal Place of Business:

25 SEDERHOLM PATH
PALM COAST, FL 32164

New Principal Place of Business:

1215 S.W. 53 ST.
CAPE CORAL, FL 33914

Current Mailing Address:

25 SEDERHOLM PATH
PALM COAST, FL 32164

New Mailing Address:

1215 S.W. 53 ST.
CAPE CORAL, FL 33914

FEI Number: 59-2355708

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MULVIHILL, PATRICK
25 SEDERHOLM PATH
PALM COAST, FL 32164 US

Name and Address of New Registered Agent:

TURNER, JACQUELINE
1215 S.W. 53 ST.
CAPE CORAL, FL 33914 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: JACQUELINE TURNER

02/17/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: TURNER, JACQUELINE
Address: 1215 S.W. 53 ST.
City-St-Zip: CAPE CORAL, FL 33914

Title: PE
Name: KNAB, JORDAN
Address: 140 7TH AVE. SOUTH, SVB112
City-St-Zip: ST. PETERSBURG, FL 33701

Title: VP
Name: HICKEY, SARAH
Address: SARASOTA SCHOOL DISTRICT1960 LANDINGS BLVD
City-St-Zip: SARASOTA, FL 34241

Title: S
Name: NEIL, IRIS
Address: SCHOOL DISTRICT PALM BEACH FOREST HILL BLD
City-St-Zip: WEST PALM BEACH, FL 33406

Title: T
Name: WILLIAMS, BARBARA
Address: 1439 ROSADA WAY
City-St-Zip: FORT MYERS, FL 33901

Title: PP
Name: MULVIHILL, PATRICK
Address: 25 SEDERHOLM PATH
City-St-Zip: PALM COAST, FL 32164

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: BARBARA A. WILLIAMS

TREA

02/17/2010

Electronic Signature of Signing Officer or Director

Date