2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 09, 2009
Secretary of State

DOCUMENT# N01321

Entity Name: FLORIDA RETIRED EDUCATORS FOUNDATION, INCORPORATED

Current Principal Place of Business:

10051 5TH ST. N
STE 108
SAINT PETERSBURG, FL 337022211 US

New Principal Place of Business:

Current Mailing Address:

10051 5TH ST. N
STE 108
SAINT PETERSBURG, FL 337022211 US

New Mailing Address:

FEI Number: 59-2439336 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BARNES, HORTON
10051 5TH ST. N.
STE #108
SAINT PETERSBURG, FL 337022211 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: JAMES, ELLEN L
Address: 515 MANDALAY RD
City-St-Zip: ORLANDO, FL 328093106 US

Title: SD ( ) Delete
Name: PHILLIP, GERMAINE J
Address: 4401 NW 19TH AVE
City-St-Zip: GAINESVILLE, FL 326053474 US

Title: TD ( ) Delete
Name: BARNES, HORTON
Address: 8480 CR 647S
City-St-Zip: BUSHNELL, FL 335137426 US

Title: VCD ( ) Delete
Name: BOYCE, BETTY WRAY
Address: 37448 BLACKBERRY CT
City-St-Zip: ZEPHYRHILLS, FL 335425241 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SD (X) Change ( ) Addition
Name: SMOOT, FRANCES
Address: 4401 NW 19TH AVE
City-St-Zip: GAINESVILLE, FL 326053474 US

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: HORTON BARNES TRE. 03/09/2009

Electronic Signature of Signing Officer or Director — Date