2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01647

FILED Jan 21, 2010 Secretary of State

Entity Name: BEACHES EDUCATIONAL FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business:

C/O RHONDA JUMBER 47 TALLWOOD RD. JACKSONVILLE BEACH, FL 32250

Current Mailing Address: New Mailing Address:

C/O REID WINGATE P.O. BOX 50739 JACKSONVILLE BEACH, FL 32240

FEI Number: 59-2414800 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

WINGATE, REID 4256 TRADEWINDS DR. JACKSONVILLE BEACH, FL 32250 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.

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Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: [

SIGNATURE:

Name: WILLIAMS, ROZANN T Address: 45 OAKWOOD RD

City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: TD

Name: WINGATE, REID Address: P.O. BOX 50739

City-St-Zip: JACKSONVILLE BEACH, FL 32240

Title: F

Name: JUMBER, RHONDA Address: 74 TALLWOOD RD

City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title:

Name: SUTTON, JOHN W
Address: 736 FOURTH AVE. NO.
City-St-Zip: JACKSONVILLE BCH., FL

Title:

Name: BRONER, NANCY
Address: 1354 PINEWOOD RD.

City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: VD

Name: YOUNG, DAVID Address: P.O BOX 50429

City-St-Zip: JACKSONVILLE BEACH, FL 32240

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: REID WINGATE TD 01/21/2010