

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000958

FILED
Jun 01, 2006
Secretary of State

Entity Name: THE COMMUNITY ALLIANCE FUNDING EDUCATION FOUNDATION, INC.

Current Principal Place of Business:

4240 LEAPING DEER LANE
JACKSONVILLE, FL 32259

New Principal Place of Business:

Current Mailing Address:

4240 LEAPING DEER LANE
JACKSONVILLE, FL 32259

New Mailing Address:

FEI Number: 71-0903438 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

WHITEMAN, JOHN L ESQ.
170 MALAGA STREET
SUITE A
ST. AUGUSTINE, FL 32084 US

Name and Address of New Registered Agent:

WHEELER, JAMES L JR
4240 LEAPING DEER LANE
JACKSONVILLE, FL 32259 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: JAMES L WHEELER JR

06/01/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WHEELER, JAMES L JR
Address: 4240 LEAPING DEER LANE
City-St-Zip: JACKSONVILLE, FL 32259

Title: D () Delete
Name: DAVIDSON, SHARON
Address: 101 EAST TOWN PLACE, SUITE 200
City-St-Zip: ST. AUGUSTINE, FL 32092

Title: D () Delete
Name: ORAM, ALAYNA
Address: 101 EAST TOWN PLACE, SUITE 200
City-St-Zip: ST. AUGUSTINE, FL 32092

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: JAMES L WHEELER JR

D

06/01/2006

Electronic Signature of Signing Officer or Director

Date