2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000240

FILED May 18, 2007 Secretary of State

Entity Name: FLORIDA COALITION FOR THE EDUCATION OF INDIVIDUALS WITH DEVELOPMENTAL

DISABILITIES, INC.

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

5300 BROKEN S BLVD NW 2ND FL 7326 ASHLEY SHORES CIRCLE

BOCA RATON, FL 33487 LAKE WORTH, FL 33467

Current Mailing Address: New Mailing Address:

5300 BROKEN S BLVD NW 2ND FL 7326 ASHLEY SHORES CIRCLE LAKE WORTH, FL 33467 BOCA RATON, FL 33487

FEI Number: 04-3704830 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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: Name and Address of New Registered Agent:

DAVIS-KILLIAN, SUSAN 7326 ASHLEY SHORES CIR LAKE WORTH, FL 33467

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:

Date

Electronic Signature of Registered Agent

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

() Delete (X) Change () Addition

OCAMPO, ASHLEY OCAMPO, ASHLEY Name: Name: 2731 BLAIRSTONE ROAD #94 Address: 1002 MICCOSUKEE ROAD Address: City-St-Zip: TALLAHASSEE, FL 323014 City-St-Zip: TALLAHASSEE, FL 32308

Title: MS. () Delete Title: () Change () Addition

HARRIS, NANCY Name: Name: Address: 1270 SW 28TH TERRACE Address: City-St-Zip: FORT LAUDERDALE, FL 33312 City-St-Zip:

Title: () Delete Title: () Change () Addition

CORSE-ADAMS, SUSAN Name: Name: 2714 MCGIRTS COVE Address: Address: City-St-Zip: JACKSONVILLE, FL 32210 City-St-Zip:

() Delete (X) Change () Addition Title: MS. Title: MR

Name: LABELLE, JAN Name: LABELLE, RICH Address: 2735 WHITNEY RD Address: 2735 WHITNEY RD City-St-Zip: CLEARWATER, FL 33760 City-St-Zip: CLEARWATER, FL 33760

Title: () Delete Title: () Change (X) Addition DAVIS-KILLIAN, SUE CHAIR Name: Name: 7326 ASHLEY SHORES CIRCLE Address: Address: City-St-Zip: City-St-Zip: LAKE WORTH, FL 33467

Title: () Delete Title: () Change (X) Addition

VAN BERGEN, AMY Name: Name: Address: Address: 511 BIRDSONG COURT LONGWOOD, FL 32779 City-St-Zip: 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: SUE DAVIS-KILLIAN CHAL 05/18/2007