## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000003666

FILED May 01, 2008 Secretary of State

Entity Name: SEBRING HIGH SCHOOL PROJECT GRADUATION, INC.

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

3514 KENILWORTH BLVD SEBRING, FL 33870

Current Mailing Address: New Mailing Address:

3514 KENILWORTH BLVD P.O. BOX 583 SEBRING, FL 33870 SEBRING, FL 33871

FEI Number: 65-0531845 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: Name and Address of New Registered Agent:

HANCOCK, TAMMY J CPA

435 S. COMMERCE AVE

SEBRING, FL 33870 US

FAIRFIELD, MARK J

3201 LAKEWOOD ROAD

SEBRING, FL 33875 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: MARK J. FAIRFIELD 05/01/2008

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P (X) Change ( ) Addition Name: ANDREWS, KAREN Name: CULLENS, TAMMY

Address: 2529 SR 17 N Address: 9235 COUNTY ROAD 635
City-St-Zip: SEBRING, FL 33870 City-St-Zip: SEBRING, FL 33875

Title: VP ( ) Delete Title: S (X) Change ( ) Addition Name: SALINDER, JOY Name: JONES, GLYNDA

Address: 2523 DOG LEG DRIVE Address: 1485 CARRINGTON AVE
City-St-Zip: SEBRING, FL 33870 City-St-Zip: SEBRING, FL 33875

 $\label{eq:title:S} {\sf Title:} \qquad {\sf Title:} \qquad {\sf T} \qquad {\sf (X) Change () Addition}$ 

 Name:
 WILLIAMS, TAMMY
 Name:
 FAIRFIELD, MARK

 Address:
 256 WARBLER AVE
 Address:
 3201 LAKEWOOD ROAD

 City-St-Zip:
 SEBRING, FL 33898
 City-St-Zip:
 SEBRING, FL 33875

Name: HANCOCK, TAMMY Name: WILLEY, ALLISON

 Address:
 2631 LAKEVIEW DRIVE
 Address:
 1301 EDGEWATER POINT DRIVE

 City-St-Zip:
 SEBRING, FL 33870
 City-St-Zip:
 SEBRING, FL 33870

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: MARK J. FAIRFIELD T 05/01/2008