

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007037

FILED  
Apr 21, 2008  
Secretary of State

**Entity Name:** CENTRAL FLORIDA CONSORTIUM OF PRIVATE SCHOOL COUNSELORS, INC.

**Current Principal Place of Business:**

5700 TRINITY PREP LANE  
WINTER PARK, FL 32792 US

**New Principal Place of Business:**

2025 STATE ROAD 436  
WINTER PARK, FL 32792 US

**Current Mailing Address:**

P.O. BOX 2121  
WINTER PARK, FL 32790 US

**New Mailing Address:**

**FEI Number:** 20-0175611      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

BURRIS, BOB  
5933 RANDOLPH AVENUE  
ORLANDO, FL 32809 US

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

FULMER, PATRICIA  
2025 STATE ROAD 436  
WINTER PARK, FL 32792 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: PATRICIA FULMER

04/21/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES ( ) Delete  
Name: BURRIS, BOB  
Address: 5933 RANDOLPH AVENUE  
City-St-Zip: ORLANDO, FL 32809 US

Title: VP ( ) Delete  
Name: ENGLEHART, VICKI  
Address: 901 N. HIGHLAND  
City-St-Zip: ORLANDO, FL 32803 US

Title: T ( ) Delete  
Name: FULMER, PATRICIA  
Address: P O BOX 952458  
City-St-Zip: LAKE MARY, FL 32792 US

Title: SEC ( ) Delete  
Name: STERLING, JENNIFER  
Address: 1221 TRINITY WOODS LANE  
City-St-Zip: MAITLAND, FL 32751 US

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

Title: PRES (X) Change ( ) Addition  
Name: OUTERBACK, ARLENE  
Address: 5933 RANDOLPH AVENUE  
City-St-Zip: ORLANDO, FL 32809 US

Title: VP (X) Change ( ) Addition  
Name: DONOHUE, MARY  
Address: 955 TRINITY LANE  
City-St-Zip: WINTER PARK, FL 32792 US

Title: TREA (X) Change ( ) Addition  
Name: FULMER, PATRICIA  
Address: P O BOX 952458  
City-St-Zip: LAKE MARY, FL 32792 US

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: PATRICIA FULMER

TREA

04/21/2008

Electronic Signature of Signing Officer or Director

Date