

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010171

FILED
May 02, 2007
Secretary of State

Entity Name: BAHAMAS EDUCATION CULTURE AND SCIENCE FOUNDATION, INC.

Current Principal Place of Business:

3616 PEACE RIVER DR.
PUNTA GORDA, FL 33983

New Principal Place of Business:

Current Mailing Address:

3616 PEACE RIVER DR.
PUNTA GORDA, FL 33983

New Mailing Address:

FEI Number: 20-0419036 **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:

GERACE, DONALD
3616 PEACE RIVER DR.
PUNTA GORDA, FL 33983 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: GERACE, DONALD
Address: 3616 PEACE RIVER DR.
City-St-Zip: PUNTA GORDA, FL 33983

Title: DS () Delete
Name: GERACE, KATHY
Address: 3616 PEACE RIVER DR.
City-St-Zip: PUNTA GORDA, FL 33983

Title: D () Delete
Name: KURDIAN, GREGORY
Address: 2734 E OAKLAND PARK BLVD
City-St-Zip: FORT LAUDERDALE, FL 333061611

Title: D () Delete
Name: GIVENS, HENRY
Address: 10500 SW 149TH ST.
City-St-Zip: MIAMI, FL 33176

Title: DT () Delete
Name: MINAYA, FRANK
Address: 80 LASALLE ST., #14G
City-St-Zip: NEW YORK, NY 10027

Title: D () Delete
Name: COOK, DALE
Address: KENT STATE UNIVERSITY
City-St-Zip: AKRON, OH 44313

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: DAVIS, ROSCOE
Address: 320 EAST 43RD STREET
City-St-Zip: NEW YORK, NY 10017

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 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: KATHY D GERACE

SEC

05/02/2007

Electronic Signature of Signing Officer or Director

Date