2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010171

FILED Apr 25, 2008 Secretary of State

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

Current Principal Place of Business:			New Principal Pla	New Principal Place of Business:	
	CE RIVER DR. ORDA, FL 339	83			
Current Mailing Address:			New Mailing Add	New Mailing Address:	
	CE RIVER DR. ORDA, FL 339	83			
El Number:	: 20-0419036	FEI Number Applied For ()	FEI Number Not Applicable (Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and Addres	ss of New Registered Agent:	
	DONALD DE RIVER DR. DRDA, FL 339	83 US			
	named entity se of Florida.	submits this statement for the p	urpose of changing its regist	ered office or registered agent, or both,	
SIGNATUF					
	Electron	ic Signature of Registered Age	nt	Date	
OFFICERS	S AND DIREC	TORS:	ADDITIONS/CHA	NGES TO OFFICERS AND DIRECTORS:	
Fitle: Name: Address: City-St-Zip:	DP () GERACE, DON 3616 PEACE R PUNTA GORDA	VER DR.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Fitle: Name: Nddress: Dity-St-Zip:	DS () GERACE, KATH 3616 PEACE R PUNTA GORDA	VER DR.	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Fitle: Name: Address: Dity-St-Zip:	D () DAVIS, ROSCO 320 EAST 43RI NEW YORK, N	STREET	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Fitle: Name: Address: City-St-Zip:	D () GIVENS, HENR 10500 SW 149 MIAMI, FL 331	ΓH ST.	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Fitle: Name: Address: City-St-Zip:	DT () MINAYA, FRANI 80 LASALLE ST NEW YORK, N	ī., #14G	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Γitle: Name:	COOK, DALE	Delete	Title: Name: Address:	() Change () Addition	

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 S 04/25/2008