

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Feb 05, 2009
Secretary of State

DOCUMENT# N04000005962

Entity Name: THE L. W. COOPER EDUCATIONAL FOUNDATION, INC.**Current Principal Place of Business:**320 HIGHWAY 98 EAST, #1201
DESTIN, FL 32541**New Principal Place of Business:**1210 SEVEN OAKS ROAD
DEFUNIAK SPRINGS, FL 32433**Current Mailing Address:**POST OFFICE BOX 5979
DESTIN, FL 32540**New Mailing Address:**1210 SEVEN OAKS ROAD
DEFUNIAK SPRINGS, FL 32433**FEI Number:** 20-1260602**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**HAWKINS, JOHN W ESQ.
4475 LEGENDARY DRIVE
DESTIN, FL 32541 US**Name and Address of New Registered Agent:**

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: D () Delete
Name: COOPER, LARRY W
Address: 320 HIGHWAY 98 EAST, #1201
City-St-Zip: DESTIN, FL 32541

Title: D () Delete
Name: LOWRY, RICHARD T
Address: 133 HOSPITAL DRIVE
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: D () Delete
Name: FERGUSON, THOMAS JR.
Address: 27 BAY DRIVE
City-St-Zip: FORT WALTON BEACH, FL 32548

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: COOPER, LARRY W
Address: 1210 SEVEN OAKS ROAD
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

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: LARRY W COOPER

D

02/05/2009

Electronic Signature of Signing Officer or Director

Date