2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2008
Secretary of State

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Entity Name: FLORIDA COALITION OF VIRTUAL SCHOOL FAMILIES, INC.

Current Principal Place of Business:

200 WEST COLLEGE AVENUE, SUITE 311B
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

200 WEST COLLEGE AVENUE, SUITE 311B
TALLAHASSEE, FL 32301

New Mailing Address:

FEI Number: 20-3811418 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COATES, RICHARD E
200 WEST COLLEGE AVENUE, SUITE 311B
TALLAHASSEE, FL 32301 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: SWART, BERNADETTE
Address: 1892 CRESTRIDGE DRIVE
City-St-Zip: CLERMONT, FL 34711

Title: D ( ) Delete
Name: SPANGLER, ROB
Address: 1125 27TH STREET NORTH
City-St-Zip: ST. PETERSBURG, FL 33713

Title: D ( ) Delete
Name: CARTER, LESLIE
Address: 5580 NW HIGHWAY 41
City-St-Zip: JASPER, FL 32052

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change ( ) Addition
Name: FREENMAN, RICKY
Address: 7129 EASY BAY BLVD
City-St-Zip: NAVARRE, FL 32566

Title: PD (X) Change ( ) Addition
Name: SPANGLER, ROB
Address: 1125 27TH STREET NORTH
City-St-Zip: ST. PETERSBURG, FL 33713

Title: STD (X) Change ( ) Addition
Name: CARTER, LESLIE
Address: 5580 NW HIGHWAY 41
City-St-Zip: JASPER, FL 32052

Title: D ( ) Change (X) Addition
Name: DE REE GUTIERREZ, NANCY
Address: 385 WILD ORANGE DRIVE
City-St-Zip: NEW SMYRNA BEACH, FL 32309

Title: D ( ) Change (X) Addition
Name: WALLER, EILEEN
Address: 3705 CASSANDRA DRIVE
City-St-Zip: TALLAHASSEE, FL 32309

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: ROB SPANGLER PD 04/25/2008

Electronic Signature of Signing Officer or Director — Date