**FILED** 

Apr 28, 2001 8:00 am Secretary of State

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## DOCUMENT # NO5415

1. Entity Name

## THE ELORIDA EDUCATIONAL FOUNDATION, INC.

THE FLORIDA EDUCATIONAL FOUNDATION, INC.					04-28-2001 90014 042 ****61.25						
Principal Place of Business		Mailing Address									
2915 BUCIDA SARASOTA FI US		2915 BUCIDA DR. SARASOTA FL 34232 US			1 <b>11</b>   8  <b>  (</b>	BII 20191 BIIH BIOG 1121	H <b>41</b> 11 <b>0</b> 3 <b>0</b> 11 1	8121) BIBNI BIAN	1831 AABIA 3885		
2. Principal Place of Business		3. Mailing Address									
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE						
City & State		City & State		4	4. FEI Number 59-2659697				pplied For ot Applicable		
Zip	Country	Zip	Country		Fee			\$8.75 Ad Fee Require			
<u> </u>	6. Name and Address of Current	Registered Agent	Name	7	. Name and	Address of New R	egistered	Agent			
GLENDINNING, RUSSELL B 2915 BUCIDA DR.				Street Address (P.O. Box Number is Not Acceptable)							
SARASOTA FL 34232			City		<del></del>		F	Zip Coo	de '		
		2/		<del></del>		u san fillia		<u>-</u>			
8. The above named entity submits this extrement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE Signature, typed operinted name of registered agent and titlen applicable. (NOTE: Registered Agent signature required when reinstating)  DATE											
FILE NOW: FEE IS \$61.25		9. Election Campaign Fi Trust Fund Contributi		<b>\$5.00</b> in Added to				Payable to	<b>.</b>		
10.	OFFICERS AND DIF		11.		DITIONS/CHA	NGES TO OFFICE	RS AND D				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HUNT, G. LAWRENCE 1814-B LANDING DR. SANFORD FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	2203	CATE!	riar way 32765	•	☐ Change	Addition (		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GLENDINNING, RUSSELL B. 2915 BUCIDA DRIVE SARASOTA FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	7 7088 2104	TUBC	ROBA TO FL 32761	R.	☐ Change	Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD WILSON, WILLIAM R. 1388 GALLINULE CIR. DELRAY BEACH FL	<b>™</b> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	14750	en B. Capr NDO FI	PECK IRD 1. 32832		Change	► Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COUTURE, JACQUE A 5318 ANDREA BLVD. ORLANDO FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	8620	BILLI	Buchana NG6Hura Z 3282E	51 P	Change	Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ESCHRICH, DAVID A 917 HAYMARKET DR. LAKELAND FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					☐ Change	☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARTI, WILLIAM A 5509 VAN BUREN ST HOLLYWOOD FL 33021	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				•	☐ Change	Addition		

ting does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if 12. I hereby certify that the information supplied with this indicated on this report of supplemental report is of the corporation or the receiver or trustee empty changed, or on an