

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 30, 2004 8:00 am
Secretary of State

04-30-2004 90302 033 ****61.25

DOCUMENT # N05415

1. Entity Name

THE FLORIDA EDUCATIONAL FOUNDATION, INC.



Principal Place of Business

4496 GOLDEN LAKE DR
SARASOTA FL 34233
US

Mailing Address

4496 GOLDEN LAKE DR
SARASOTA FL 34233
US

24062068



MOORE CR2E037 (11/03)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2659697

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GLENDINNING, RUSSELL B
4496 GOLDEN LAKE DR
SARASOTA FL 34233

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME HUNT, G. LAWRENCE ☐ Delete
STREET ADDRESS 6108 TINLEY TERR
CITY-ST-ZIP SANFORD FL 32773

TITLE D
NAME ESCHERICH, DAVID A ☐ Change ☐ Addition
STREET ADDRESS 917 HAYMARKET DR
CITY-ST-ZIP LAKELAND FL 33809

TITLE SD
NAME GLENDINNING, RUSSELL B. ☐ Delete
STREET ADDRESS 4496 GOLDEN LAKE DR
CITY-ST-ZIP SARASOTA FL 34233

TITLE D
NAME HUNTER, CHRIS ☐ Change ☐ Addition
STREET ADDRESS 2203 CATBRIAR WAY
CITY-ST-ZIP OVIEDO, FL 32765

TITLE D
NAME CRAMER, ROBERT ☐ Delete
STREET ADDRESS 2109 TUSCARDRA TR
CITY-ST-ZIP MAITLAND FL 32761

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D
NAME BUCNANAN, HAROLD ☐ Delete
STREET ADDRESS 8620 BILLING HURST
CITY-ST-ZIP ORLANDO FL 32825

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D
NAME PECK, WARREN B ☐ Delete
STREET ADDRESS 14736 CAPRI RD
CITY-ST-ZIP ORLANDO FL 32832

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D
NAME MARTI, WILLIAM A ☐ Delete
STREET ADDRESS 5509 VAN BUREN ST
CITY-ST-ZIP HOLLYWOOD FL 33021

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true 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 the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Russell B. Glendinning* 4/27/04 941-758-2582
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR SECRETARY Date Daytime Phone #