

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

04-19-2007 90193 006 *****61.25
N06000004986

FILED

07 MAY -7 AM 10:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
40069471

DOCUMENT # N06000004986

1. Entity Name
EXCELSIOR EDUCATION & TRAINING FOUNDATION,
INC.



Principal Place of Business
9405 17TH AVE. NW
BRADENTON, FL 34209

Mailing Address
9405 17TH AVE. NW
BRADENTON, FL 34209

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04132007 Chg-NP CR2E037 (12/06)

4. FEI Number

204830063

Applied For

Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SILBERSTEIN, DAVID M
720 S. ORANGE AVE.
SARASOTA, FL 34236

7. Name and Address of New Registered Agent

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 registering)

DATE

Filing Fee is \$61.25
Due by May 1, 2007

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

TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	President / Director	☐ Change ☒ Addition
NAME	Michael J. Guccione	
STREET ADDRESS	9405 17th Ave N.W.	
CITY-ST-ZIP	Bradenton FL 34209	
TITLE	Chairman of Board / Director	☐ Change ☒ Addition
NAME	Ethelene B. Moore	
STREET ADDRESS	9405 17th Ave N.W.	
CITY-ST-ZIP	Bradenton FL 34209	
TITLE	Treasurer / Director	☐ Change ☒ Addition
NAME	Robert Wenzel	
STREET ADDRESS	2705 Fruitville Rd.	
CITY-ST-ZIP	Sarasota FL 34237	
TITLE	Secretary	☐ Change ☒ Addition
NAME	David Miner / Director	
STREET ADDRESS	923 39th St. W.	
CITY-ST-ZIP	Bradenton FL 34205	
TITLE	Director	☐ Change ☒ Addition
NAME	Dr. Liaquat Allarakia	
STREET ADDRESS	4812 26th St. W.	
CITY-ST-ZIP	Bradenton FL 34205	
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 exemptions contained 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 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: Michael J. Guccione 4-13-07 941-761-1155
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #