

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06640

FILED
Jan 19, 2006
Secretary of State

Entity Name: FLORIDA ASSOCIATION OF ACCOUNTING EDUCATORS, INC.

Current Principal Place of Business:

C/O JOHN KLETT
IRCC
FORT PIERCE, FL 34981 US

New Principal Place of Business:

Current Mailing Address:

C/O JOHN KLETT
IRCC
FORT PIERCE, FL 34981 US

New Mailing Address:

FEI Number: 59-2352134 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

KLETT, JOHN
IRCC
3209 VIRGINIA AVE.
FORT PIERCE, FL 34981 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: ALLEN, VERN
Address: 3001 SW COLLEGE RD.
City-St-Zip: OCALA, FL 34474

Title: D () Delete
Name: PENDARUIS, DEBORAH
Address: ST RD 52 WEST
City-St-Zip: SAINT LEO, FL 33574

Title: D () Delete
Name: REIMERS, JANE
Address: 1000 HOLT AVE. 2722
City-St-Zip: WINTER PARK, FL 32789

Title: TD () Delete
Name: KLETT, JOHN
Address: 3209 VIRGINIA DRIVE
City-St-Zip: FT. PIERCE, FL 34981

Title: PD () Delete
Name: CLEGG, TONI
Address: 4200 CONGRESS AVE.
City-St-Zip: LAKE WORTH, FL 33461

Title: D () Delete
Name: WERNER, MICHAEL
Address: 8650 SW 132 ST.
City-St-Zip: MIAMI, FL 33156

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change () Addition
Name: MARI, MARIA
Address: 11011 S.W. 104TH STREET
City-St-Zip: MIAMI, FL 33176

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JOHN KLETT

TREA

01/19/2006

Electronic Signature of Signing Officer or Director

Date