2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000003369

Apr 12, 2011 Secretary of State

Entity Name: FLORIDA ASSOCIATION OF COLLEGIATE REGISTRARS AND ADMISSIONS OFFICERS, CORP.

Current Principal Place of Business: New Principal Place of Business:

VALENCIA COMM. COLL. 1800 SO. KIRKMAN ROAD ATTENTION: DR. RENEE SIMPSON 1800 SO. KIRKMAN ROAD

ATTENTION: DR. RENEE SIMPSON

ORLANDO, FL 32811 ORLANDO, FL 32811

Current Mailing Address: New Mailing Address:

VALENCIA COMM. COLL. 1800 SO. KIRKMAN ROAD ATTENTION: DR. RENEE SIMPSON 1800 SO. KIRKMAN ROAD

ATTENTION: DR. RENEE SIMPSON

ORLANDO, FL 32811 ORLANDO, FL 32811

FEI Number: 59-3088137 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SIMPSON, RENEE K DR SIMPSON, RENEE K DR.

1800 SO, KIRKMAN ROAD VALENCIÁ COMM. COLL. 1800 SO. KIRKMAN ROAD

ORLANDO, FL 32811 ORLANDO, FL 32811 US

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: 04/12/2011

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

PRES

LAVIOLETTE, R. MARC Name:

FGCU, 10501 FGCU BOULEVARD SOUTH Address:

City-St-Zip: FORT MYERS, FL 33965

Title:

Name: YANCEY, JOHN

Address: UNIVERSITY OF NORTH FLORIDA. 1 UNF DRIVE

City-St-Zip: JACKSONVILLE, FL 32224

Title: **TREA**

SIMPSON, RENEE K DR. Name:

Address: VALENCIA COMM. COLL. 1800 SO. KIRKMAN ROAD

City-St-Zip: ORLANDO, FL 32811

Title: SECR

Name: ALLEN, KATHY

NEW COLLEGE OF FLORIDA, 5800 BAY SHORE DR. Address:

City-St-Zip: SARASOTA, FL 34243

Title: VPPD

Name: CROSSMAN, LINDA

USF ST. PETE. 140 7TH AVE. SOUTH, BAY 102 Address:

ST. PETERSBURG, FL 33701 City-St-Zip:

Title: **VPGP**

RODRIGUEZ, BARBARA Name: Address: UCF PO BOX 160112 ORLANDO, FL 32829 City-St-Zip:

I hereby 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 all other like empowered.

SIGNATURE: DR. RENEE K. SIMPSON **TREA** 04/12/2011