## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N09000005333

FILED Jan 05, 2012 Secretary of State

Entity Name: FLORIDA ADULT AND TECHNICAL DISTANCE EDUCATION CONSORTIUM, INC.

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

FATDEC % ACE OF FLORIDA, INC. 912 S MARTIN LUTHER KING, JR. BLVD TALLAHASSEE, FL 32301

Current Mailing Address: New Mailing Address:

FATDEC % ACE OF FLORIDA, INC. 365 SW PANTHER TRACE PORT ST. LUCIE, FL 34953

FEI Number: 27-0252101 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

GATES, KIM 365 SW PANTHER TRACE PORT ST LUCIE, FL 34953 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:

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Γitle: I

Name: MARSH, NANCY

Address: 13043 SCHARBER ROAD City-St-Zip: DADE CITY, FL 33525

Title: S

 Name:
 JOHNSON, JUDY

 Address:
 4507 N SADDLE DRIVE

 City-St-Zip:
 BEVERLY HILLS, FL 34465

Title:

Name: CLARK, LEIGHANN

Address: ACE OF FLORIDA, INC.,912 S MLK JR BLVD

City-St-Zip: TALLAHASSEE, FL 32301

Title: \

 Name:
 LUEBBE, JOAN

 Address:
 1004 SE 5TH AVENUE

 City-St-Zip:
 CRYSTAL RIVER, FL 34429

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: NANCY MARSH P 01/05/2012