

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000000566

**FILED**  
**Mar 16, 2012**  
**Secretary of State**

**Entity Name:** VOLUSIA CHAPTER OF THE COUNCIL OF EXCEPTIONAL CHILDREN CORP.

**Current Principal Place of Business:**

322 N. MARYDELL AVE  
DELAND, FL 32720

**New Principal Place of Business:**

**Current Mailing Address:**

322 N. MARYDELL AVE  
DELAND, FL 32720

**New Mailing Address:**

**FEI Number:** 59-3665756

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HINES, TRACY S  
250 NORTH CAUSEWAY  
NEW SMYRNA BEACH, FL 32169 US

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

WILSON, SHIRLEY M  
322 NORTH MARYDELL AVENUE  
DELAND, FL 32720 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: SHIRLEY M. WILSON

03/16/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: HINES, TRACY S  
Address: 250 NORTH CAUSEWAY  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: TREA  
Name: WILSON, SHIRLEY M  
Address: 322 N MARYDELL AVE  
City-St-Zip: DELAND, FL 32720

Title: VP  
Name: VEGTER, KIM G  
Address: 17 PAXTUTANT LANE  
City-St-Zip: PALM COAST, FL 32164

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: SHIRLEY M. WILSON

TREA

03/16/2012

Electronic Signature of Signing Officer or Director

Date