2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

May 14, 2003 8:00 am g Secretary of State DOCUMENT # **N11068** 05-14-2003 90140 022 ****61.25 1. Entity Name THE GADSDEN EDUCATION FOUNDATION. INC. Principal Place of Business Mailing Address GADSDEN CO. SCHOOL BOARD GADSDEN CO. SCHOOL BOARD 35 MARTIN L. KING BLVD. 35 MARTIN L. KING BLVD. QUINCY FL 32351-9218 QUINCY FL 32351-9218 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES... 4. FEI Number 59-2695259 City & State City & State Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent `HARRIS,`DOUGLAS''' 🗀 🕆 Street Address (P.O. Box Number is Not Acceptable) 35 MARTIN L. KING BLVD. QUINCY FL 32351 City 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 4 Signature, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to *, FILE NOW: FEE IS \$61.25 \$5.00 May Be Trust Fund Contribution. Florida Department of State Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. **VPD** ☐ Addition TITLE TITLE ☐ Change ☐ Delete NAME LEWIS, AUDREY NAME 35 MARTIN L. KING JR. BLVD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP QUINCY FL 32351 CITY-ST-ZiP ☐ Delete ☐ Change Addition TITLE TITLE NAME SHY, VERGIE . NAME STREET ADDRESS 107 W. FRANKLIN STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP QUINCY FL 32351 TD TITLE ☐ Delete TITLE ☐ Change ☐ Addition JACKSON, LILLIE - - - --NAME NAME STREET ADDRESS **500 WEST KING STREET** STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP QUINCY FL 32351 TITLE ☐ Delete TITLE Change ☐ Addition JOHNSON, WILLIE NAME NAME STREET ADDRESS 824 W. WASHINGTON STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP QUINCY FL 32351 TD TITLE ☐ Delete TITLE ☐ Change Addition NAME ALEXANDER, JOSEPH NAME STREET ADDRESS RT. 6 BOX 102 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP QUINCY FL 32351 TITLE TD ☐ Delete TITLE ☐ Change ☐ Addition JAMES, REGINALD NAME

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

35 MARTIN L KING JR. BLVD.

QUINCY FL 32351

STREET ADDRESS

CITY-ST-ZIP

FILED