2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13710

FILED Jan 07, 2004 Secretary of State

Entity Name: THE FOUNDATION FOR SEMINOLE COUNTY PUBLIC SCHOOLS, INC.

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

% PAUL J. HAGERTY %TINA CALDERONE, ED.D.
400 E. LAKE MARY BOULEVARD 400 E. LAKE MARY BOULEVARD

SANFORD, FL 32773 SANFORD, FL 32773

Current Mailing Address: New Mailing Address:

% PAUL J. HAGERTY %TINA CALDERONE, ED.D.
400 E. LAKE MARY BOULEVARD 400 E. LAKE MARY BOULEVARD
SANFORD, FL 32773 SANFORD, FL 32773

FEI Number: 59-2775956 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:

HAGERTY, PAUL J.

400 E. LAKE MARY BLVD.

SANFORD, FL 32773 US

CALDERONE, TINA L ED.D.

400 E. LAKE MARY BLVD.

SANFORD, FL 32773 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: TINA CALDERONE 01/07/2004

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: D () Delete Title: D (X) Change () Addition

 Name:
 HAGERTY, PAUL J.
 Name:
 VOGEL, BILL

 Address:
 400 E LAKE MARY BLVD
 Address:
 400 E LAKE MARY BLVD

 City-St-Zip:
 SANFORD, FL 32773
 City-St-Zip:
 SANFORD, FL 32773

Title: D () Delete Title: () Change () Addition

 Name:
 ANDERSON, LAURIE
 Name:

 Address:
 P O BOX 945255
 Address:

 City-St-Zip:
 MAITLAND, FL 327945255
 City-St-Zip:

 $\label{eq:title:D} {\sf Title:} \qquad {\sf CD} \qquad (\) \, {\sf Delete} \qquad \qquad {\sf Title:} \qquad {\sf D} \qquad ({\sf X}) \, {\sf Change} \, (\) \, {\sf Addition}$

Name: BAIR, CRAIG Name: BAIR, CRAIG

Address: 1401 W SEMINOLE BLVD
City-St-Zip: SANFORD, FL 32771
Address: 1401 W SEMINOLE BLVD
City-St-Zip: SANFORD, FL 32771
SANFORD, FL 32771

Name:ROUX, GERRYName:ROUX, GERRYAddress:460 E ALTAMONTE DRIVEAddress:460 E ALTAMONTE DRIVE

City-St-Zip: ALTAMONTE SPRINGS, FL 32701 City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: MD () Delete Title: MD (X) Change () Addition

 Name:
 CALDERONE, TINA
 Name:
 CALDERONE, TINA

 Address:
 400 E.LAKE MARY BLVD.
 Address:
 400 E.LAKE MARY BLVD.

 City-St-Zip:
 SANFORD, FL
 City-St-Zip:
 SANFORD, FL 32773

I hereby certify that the information supplied with this filing does not qualify for the 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 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: TINA CALDERONE MD 01/07/2004