

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13710

FILED
Jan 04, 2008
Secretary of State

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

Current Principal Place of Business:

400 E. LAKE MARY BOULEVARD
SANFORD, FL 32773

New Principal Place of Business:

Current Mailing Address:

400 E. LAKE MARY BOULEVARD
SANFORD, FL 32773

New Mailing Address:

FEI Number: 59-2775956

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GEBOFF, ERIC MSW
400 E LAKE MARY BLVD
SANFORD, FL 32773 US

Name and Address of New Registered Agent:

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:

Title: D () Delete
Name: VOGEL, BILL
Address: 400 E LAKE MARY BLVD
City-St-Zip: SANFORD, FL 32773

Title: T () Delete
Name: BARTH, SEAN
Address: 4055 ST JOHNS PKWY
City-St-Zip: SANFORD, FL 32771

Title: D () Delete
Name: GEBOFF, ERIC
Address: 400 E LAKE MARY BLVD
City-St-Zip: SANFORD, FL 32773

Title: VP () Delete
Name: KREISLER, GARY
Address: 2102 PRK CTR DR STE 150
City-St-Zip: ORLANDO, FL 32835

Title: S () Delete
Name: RUSKIN, WENDY
Address: 661 E. ALTAMONTE DRIVE, #129
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: P () Delete
Name: CHACE, SANDY
Address: 950 MARKET PROMENADE AVE 2200
City-St-Zip: LAKE MARY, FL 32746

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: P (X) Change () Addition
Name: JOHNSON, TRICIA
Address: 455 NORTH GARLAND AVENUE
City-St-Zip: ORLANDO, FL 32801

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: ERIC GEBOFF

D

01/04/2008

Electronic Signature of Signing Officer or Director

Date