

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 14, 2001 8:00 am
Secretary of State

02-14-2001 90023 005 ****61.25

DOCUMENT # N18454

1. Entity Name

THE FOUNDATION FOR ORANGE COUNTY PUBLIC SCHOOLS, INC.

Principal Place of Business

Mailing Address

445 W. AMELIA AVENUE
 PO BOX 271
 ORLANDO FL 32801
 US

32801-0271
 P.O. BOX 271
 ORLANDO FL 32802
 US

2. Principal Place of Business

3. Mailing Address

Same

445 West Amelia Street

Suite, Apt. #, etc.
 Suite 901

Suite, Apt. #, etc.

City & State
 Orlando, Florida

City & State

4. FEI Number

59-2788435

Applied For

Not Applicable

Zip
 32801

Country
 USA

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PRATT, PAULA
 390 N ORANGE AVE STE 1500
 PO BOX 1391
 ORLANDO FL 32802

Name Andrew L. Brooks, ZHA Incorporated

Street Address (P.O. Box Number is Not Acceptable)

225 East Robinson Street

Suite 200

City Orlando

FL

Zip Code 32801

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.

SIGNATURE

Andrew L. Brooks

2/6/01

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD Delete
 NAME MCCLELLAND, W. ROBERT
 STREET ADDRESS BEERS CONSTRUCTION, 60 N COURT AVE 100
 CITY-ST-ZIP ORLANDO FL 32801

TITLE C/D Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE TD Delete
 NAME SANTOMASSINO, ROCKY
 STREET ADDRESS PO BOX 538239
 CITY-ST-ZIP ORLANDO FL 32853

TITLE T/D Change Addition
 NAME Sandra Enoch, IBM Corporation
 STREET ADDRESS 1042 Chesterfield Circle
 CITY-ST-ZIP Winter Springs FL 32708

TITLE SD Delete
 NAME RUOFF, LEXA
 STREET ADDRESS UNIVERSAL STUDIOS, 1000 UNIVERSAL ST PLZ
 CITY-ST-ZIP ORLANDO FL 32819

TITLE S/D Change Addition
 NAME Daryl Greenwood, Walt Disney World
 STREET ADDRESS P.O. Box 10,000
 CITY-ST-ZIP Lake Buena Vista FL 32830

TITLE M Delete
 NAME STERBA, CATHY
 STREET ADDRESS 390 N. ORANGE AVENUE
 CITY-ST-ZIP ORLANDO FL 32801

TITLE D Change Addition
 NAME Nicholas Carbone, Jr., Poole Carbone Eckbert
 STREET ADDRESS 250 Park Avenue South, Suite 600
 CITY-ST-ZIP Winter Park FL 32789

TITLE ED Delete
 NAME PEED, NANCY
 STREET ADDRESS 445 W AMELIA ST
 CITY-ST-ZIP ORLANDO FL 32801

TITLE P/D Change Addition
 NAME Andrew L. Brooks, ZHA Incorporated
 STREET ADDRESS 225 East Robinson Street, Suite 200
 CITY-ST-ZIP Orlando FL 32801

TITLE CB Delete
 NAME PRATT, PAULA
 STREET ADDRESS PO BOX 1391
 CITY-ST-ZIP ORLANDO FL 32802

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.

SIGNATURE:

Andrew L. Brooks

Andrew L. Brooks

2/6/01

407-422-7487

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)