

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

**FILED  
Jan 10, 2012  
Secretary of State**

DOCUMENT# N18454

**Entity Name:** FOUNDATION FOR ORANGE COUNTY PUBLIC SCHOOLS, INC.

**Current Principal Place of Business:**

445 W. AMELIA ST.  
SUITE 901  
ORLANDO, FL 32801 US

**New Principal Place of Business:**

**Current Mailing Address:**

445 W. AMELIA ST.  
SUITE 901  
ORLANDO, FL 32801 US

**New Mailing Address:**

**FEI Number:** 59-2788435      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

WILLIAMS, CYNTHIA L  
445 W. AMELIA ST.  
SUITE 901  
ORLANDO, FL 32801 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: CH  
Name: FIDELO, ALAN  
Address: 445 W AMELIA STREET, SUITE 901  
City-St-Zip: ORLANDO, FL 32801 US

Title: CE  
Name: SANABRIA, EDDIE  
Address: 445 W AMELIA STREET, SUITE 901  
City-St-Zip: ORLANDO, FL 32801

Title: VC  
Name: LOSCH, JOE  
Address: 445 W AMELIA STREET, SUITE 901  
City-St-Zip: ORLANDO, FL 32801

Title: ED  
Name: WILLIAMS, CYNTHIA L  
Address: 445 W. AMELIA STREET #901  
City-St-Zip: ORLANDO, FL 32801

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: CYNTHIA L. WILLIAMS

ED

01/10/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date