2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20484

FILED May 12, 2009 Secretary of State

Entity Name: WASHINGTON-HOLMES TECHNICAL CENTER FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business: CHIPLEY, FL 32428 US **Current Mailing Address: New Mailing Address:** 757 HOYT ST. CHIPLEY, FL 32428 US FEI Number: 59-2810664 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HOLLEY, GERALD 1282 B CHURCH AVE US CHIPLEY, FL 32428 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete DOUGHERTY, JOHN III DOUGHERTY, JOHN III Name: Name: 904 MAIN STREET. Address: 904 MAIN STREET. Address: City-St-Zip: CARYVILLE, FL 32427 City-St-Zip: CHIPLEY, FL 32428 Title: () Delete Title: CHAI (X) Change () Addition WALL, DARREN Name: WALL, DARREN Name: Address: PO BOX 64 Address: PO BOX 64 City-St-Zip: CHIPLEY, FL 32428 City-St-Zip: CHIPLEY, FL 32428 Title: () Delete Title: () Change () Addition SAUNDERS, WAYNE Name: Name: Address: 847 CANDY LANE Address: City-St-Zip: CHIPLEY, FL 32428 City-St-Zip: (X) Change () Addition Title: () Delete Title: SECR Name: SMITH, TOMMY Name: SMITH, TOMMY Address: 757 HOYT ST Address: 757 HOYT ST City-St-Zip: CHIPLEY, FL 32428 City-St-Zip: CHIPLEY, FL 32428 Title: (X) Delete Title: () Change () Addition DOUGHERTY III, JOHN Name: Name: 904 MAIN STREET Address: Address: City-St-Zip: CHIPLEY, FL 32428 City-St-Zip: Title: CHAI (X) Delete Title: () Change () Addition WALL DARREN Name: Name: Address: PO BOX 64 Address: CHIPLEY, FL 32428 City-St-Zip: City-St-Zip:

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: TOMMY SMITH SECR 05/12/2009