

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED

Feb 11, 2008 08:00 AM
Secretary of State

DOCUMENT # N22541

1. Entity Name
**FLORIDA PUBLIC INTEREST RESEARCH GROUP
EDUCATION FUND, INC.**



Principal Place of Business
**926 E PARK AVE
TALLAHASSEE, FL 32301 US**

Mailing Address
**926 E PARK AVE
TALLAHASSEE, FL 32301 US**



02072008 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2854230

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**FERRULO, MARK
926 E PARK AVE
TALLAHASSEE, FL 32301**

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	TRILSCH, RICHARD
STREET ADDRESS	218 D STREET SE
CITY-ST-ZIP	WASHINGTON, DC 20003
TITLE	T
NAME	LINDBERG, SUSANNAH
STREET ADDRESS	1331 PALMETTO DR.
CITY-ST-ZIP	WINTER PARK, FL 32789
TITLE	S
NAME	FERRULO, MARK
STREET ADDRESS	704 W. MADISON ST
CITY-ST-ZIP	TALLAHASSEE, FL 32304
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U000000224855
02/20/08-80096-008 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

Mark Ferrulo
Mark Ferrulo

2/7/08

8502245944

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #