

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25451

FILED
Feb 08, 2012
Secretary of State

Entity Name: POLK EDUCATION FOUNDATION AND BUSINESS PARTNERSHIP, INC.

Current Principal Place of Business:

1530 SHUMATE DR.
BARTOW, FL 33830

New Principal Place of Business:

Current Mailing Address:

1530 SHUMATE DR.
BARTOW, FL 33830

New Mailing Address:

FEI Number: 59-2956529

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOOKS, HOLLIS
225 E. LEMON ST., STE. 100
LAKELAND, FL 33801 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: PD
Name: HOOKS, HOLLIS
Address: 225 E. LEMON ST., STE. 100
City-St-Zip: LAKELAND, FL 33801 US

Title: VPD
Name: WILSON, MARY RUTH
Address: 200 AIRPORT RD.
City-St-Zip: FROSTPROOF, FL 33843 US

Title: D
Name: STEPHENS, RICK
Address: 2115 HARDEN BLVD.
City-St-Zip: LAKELAND, FL 33803 US

Title: STD
Name: ULLMAN, DAVID
Address: 230 E. TILLMAN AVE.
City-St-Zip: LAKE WALES, FL 33859 US

Title: D
Name: MISCH, DEBBIE
Address: 5075 BOY SCOUT RANCH RD.
City-St-Zip: BARTOW, FL 33830 US

Title: ED
Name: COPELAND, SUSAN
Address: 1902 LAKE ARIANA BLVD
City-St-Zip: AUBURNDALE, FL 33823 US

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: SUSAN COPELAND

ED

02/08/2012

Electronic Signature of Signing Officer or Director

Date