

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34820

FILED
Feb 05, 2011
Secretary of State

Entity Name: FLORIDA COUNCIL FOR THE SOCIAL STUDIES, INC.

Current Principal Place of Business:

901 38TH AVENUE NE
ST. PETERSBURG, FL 33704 US

New Principal Place of Business:

Current Mailing Address:

901 38TH AVENUE NE
ST. PETERSBURG, FL 33704 US

New Mailing Address:

FEI Number: 59-2643694 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

EGOLF, RALPH
901 38TH AVENUE N.E.
ST. PETERSBURG, FL 33704 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: ED
Name: EGOLF, RALPH
Address: 901 38TH AVENUE NE
City-St-Zip: ST. PETERSBURG, FL 33704 US

Title: D
Name: FELTON, RANDALL
Address: 310 SKATE DR
City-St-Zip: TALLAHASSEE, FL 32312

Title: D
Name: KELLER, SHEILA
Address: 9923 INDIAN KEY TRAIL
City-St-Zip: SEMINOLE, FL 33776

Title: D
Name: DAY, SALLY
Address: 2112 EGRET DR.
City-St-Zip: CLEARWATER, FL

Title: D
Name: DORSETT, FRED
Address: 1701 MISSISSIPPI AVE NE
City-St-Zip: ST PETERSBURG, FL

Title: D
Name: TRIMBLE, DR. THERON
Address: 1055 MOON LAKE DR.
City-St-Zip: NAPLES, FL 34104

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: RALPH EGOLF

ED

02/05/2011

Electronic Signature of Signing Officer or Director

Date