

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35307

FILED
Jan 07, 2010
Secretary of State

Entity Name: FLORIDA PREPAID COLLEGE FOUNDATION, INC.

Current Principal Place of Business:

1801 HERMITAGE BLVD
SUITE 210
TALLAHASSEE, FL 323990300 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1117
TALLAHASSEE, FL 32302 US

New Mailing Address:

FEI Number: 59-3012202

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FISHER, CASEY
1801 HERMITAGE BLVD.
SUITE 210
TALLAHASSEE, FL 323990300 US

Name and Address of New Registered Agent:

FISHER, CASEY L
1801 HERMITAGE BLVD.
SUITE 210
TALLAHASSEE, FL 323990300 US

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: CASEY L. FISHER

01/07/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: OTTENSTROER, DUANE L
Address: 10739 DEERWOOD PARK BLVD. SUITE 103
City-St-Zip: JACKSONVILLE, FL 32256 US

Title: D
Name: MURMAN, SANDRA HON
Address: 410 BLANCA AVENUE
City-St-Zip: TAMPA, FL 33606 US

Title: D
Name: HAMILTON, CHRISTYNE B
Address: 2105 WAITMAN AVE
City-St-Zip: LEESBURG, FL 34748 US

Title: D
Name: SILVER, RON HON
Address: 407 LINCOLN RD, PENTHOUSE SOUTHEAST
City-St-Zip: MIAMI BEACH, FL 33139 US

Title: D
Name: WALLACE, THOMAS J
Address: 1801 HERMITAGE BOULEVARD, STE 210
City-St-Zip: TALLAHASSEE, FL 32308 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: THOMAS J. WALLACE

D

01/07/2010

Electronic Signature of Signing Officer or Director

Date