

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36848

FILED
Mar 30, 2010
Secretary of State

Entity Name: FLAGLER COUNTY EDUCATION DIRECT-SUPPORT ORGANIZATION, INC.

Current Principal Place of Business:

1769 EAST MOODY BLVD
BUILDING 2
BUNNELL, FL 32110

New Principal Place of Business:

Current Mailing Address:

1769 EAST MOODY BLVD
BUILDING 2
BUNNELL, FL 32110

New Mailing Address:

FEI Number: 59-3006312

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GAVIN, KRISTY
315 S. MAIN ST. STE 300
JACKSONVILLE, FL 32207 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: HENDERSON, LARRY
Address: 454 BRUCE LANE
City-St-Zip: PALM COAST, FL 32164

Title: PED
Name: CUFF, ROBERT
Address: 142 BREN MAR LANE
City-St-Zip: PALM COAST, FL 32137

Title: VPD
Name: GARDNER, JR, JAMES E
Address: 4 LAMBERT COVE
City-St-Zip: FLAGLER BEACH, FL 32136

Title: SD
Name: GRANT, JONNIE
Address: 215 PINE COANE TRAIL
City-St-Zip: ORMOND BEACH, FL 32174

Title: TD
Name: CARLTON, NANCY
Address: 96 FRONT STREET
City-St-Zip: PALM COAST, FL 32137

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: JOANN CHECCHI

ACCT

03/30/2010

Electronic Signature of Signing Officer or Director

Date