


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 09, 2006 8:00 am
Secretary of State

08-09-2006 90012 042 ****70.00

DOCUMENT # N42053 1. Entity Name PASCO EDUCATION FOUNDATION, INC.					
Principal Place of Business 7227 LAND O' LAKES BLVD LAND O LAKES, FL 34638 US			Mailing Address P.O. BOX 1248 LAND O LAKES, FL 34639 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent WICHMANOWSKI, HENRY G EX DIR DISTRICT SCHOOL BOARD OF PASCO COUNTY 7227 LAND O' LAKES BLVD. LAND O' LAKES, FL 34638			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
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. <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="width: 60%;"> SIGNATURE <u><i>Henry G. Wichmanowski</i></u> <small>Signature, typed or printed name of registered agent and title if applicable.</small> </div> <div style="width: 35%; text-align: right;"> <u>7/13/06</u> <small>DATE</small> </div> </div>					
Filing Fee is \$81.25 Due by September 6, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES BRACKEN, GARY P.O. BOX 6665 MC 2008 ST LEO, FL 34574	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ARNETT, ROBERT 9111 PROSPERITY LANE PORT RICHEY, FL 34654	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREA KIRBY, RAMOLA 11050 SPRING HILL DRIVE SPRING HILL, FL 34608	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECR MCCARTHY, JERRY 1531 N DALE MABRY HWY SUITE 101 LUTZ, FL 33549	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Pres Starnes, Larry 14210 Seventh Street Dade City, FL 33523	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Chansler, Vickie 10555 Moon Lake Road New Port Richey, FL 34654	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Trea Lyon, Mark 13340 Hudson Avenue Hudson, FL 34669	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secr Key, David 4027 Tampa Road, Suite 3000 Oldsmar, FL 34677	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition			

30024809



07112006 Chg-NP CR2E037 (4/06)

4. FEI Number
59-3048717

Applied For
Not Applicable

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

SIGNATURE:

Henry G. Wichmanowski
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7/12/06 (813) 794-2705