

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42053

FILED
Mar 20, 2009
Secretary of State

Entity Name: PASCO EDUCATION FOUNDATION, INC.

Current Principal Place of Business:

7227 LAND O' LAKES BLVD
LAND O LAKES, FL 34638 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1248
LAND O LAKES, FL 34639 US

New Mailing Address:

FEI Number: 59-3048717 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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 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: PRES () Delete
Name: STARNES, LARRY
Address: 14210 SEVENTH STREET
City-St-Zip: DADE CITY, FL 33523 US

Title: VP () Delete
Name: CHANSLER, VICKIE
Address: 10555 MOON LAKE RD.
City-St-Zip: PORT RICHEY, FL 34654 US

Title: TREA () Delete
Name: LYON, MARK
Address: 13340 HUDSON AVE
City-St-Zip: HUDSON, FL 34669 US

Title: SECR () Delete
Name: KEY, DAVID
Address: 3212 SUNSET LAKES BLVD.
City-St-Zip: LAND O' LAKES, FL 34638 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: CHANSLER, VICKIE
Address: 10555 MOON LAKE RD.
City-St-Zip: NEW PORT RICHEY, FL 34654 US

Title: VP (X) Change () Addition
Name: KEY, DAVID
Address: 31815 LITTLE RD.
City-St-Zip: TRINITY, FL 34655 US

Title: TREA (X) Change () Addition
Name: GRIESMER, DENIS
Address: 1324 SEVEN SPRINGS BLVD., #323
City-St-Zip: NEW PORT RICHEY, FL 34655 US

Title: SECR (X) Change () Addition
Name: PRENTICE, DONNA
Address: 1000 N. ASHLEY DRIVE, STE. 104
City-St-Zip: TAMPA, FL 33602 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DONNA PRENTICE

SECY

03/20/2009

Electronic Signature of Signing Officer or Director

Date