

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42233

FILED
May 01, 2009
Secretary of State

Entity Name: THE FLORIDA ENDOWMENT FOUNDATION FOR VOCATIONAL REHABILITATION, INC.

Current Principal Place of Business:

106 E COLLEGE AVE
SUITE 820
TALLAHASSEE, FL 32301 US

New Principal Place of Business:

3320 THOMASVILLE ROAD
SUITE 200
TALLAHASSEE, FL 32308 US

Current Mailing Address:

106 E COLLEGE AVE
SUITE 820
TALLAHASSEE, FL 32301 US

New Mailing Address:

3320 THOMASVILLE ROAD
SUITE 200
TALLAHASSEE, FL 32308 US

FEI Number: 59-3052307 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HOMANT, SUSANNE F DR.
106 E COLLEGE AVE
SUITE 820
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

HOMANT, SUSANNE F DR.
3320 THOMASVILLE ROAD
SUITE 200
TALLAHASSEE, FL 32308 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:

05/01/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: PALLANGO, BRIDGET R
Address: 2121 N.W. 21ST STREET
City-St-Zip: MIAMI, FL 33142 US

Title: VC () Delete
Name: SEILER, FLORENCE M
Address: 4410 LACEY OAK DRIVE
City-St-Zip: PALM BEACH GARDENS, FL 33410 US

Title: T () Delete
Name: DOLAN, JAMES P
Address: 4198 PALOMA POINTE CT
City-St-Zip: JACKSONVILLE, FL 32217

Title: S () Delete
Name: AMENDOLA, JEANNIE
Address: 1375 LAKE BUENA VISTA DR
City-St-Zip: LAKE BUENA VISTA, FL 32830 US

Title: D () Delete
Name: HAVENS, JASON E
Address: 4400 EAST HIGHWAY 20, STE 211
City-St-Zip: NICEVILLE, FL 32578 US

Title: D () Delete
Name: COLE, RICHARD L
Address: 1720 ST. JAMES CIRCLE
City-St-Zip: THE VILLAGES, FL 32162 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: MACARTHUR, BARBARA G
Address: 1300 MICCOSUKEE ROAD
City-St-Zip: TALLAHASSEE, FL 32308 US

Title: D (X) Change () Addition
Name: AMORES, ELADIO
Address: 3660 N WASHINGTON BLVD., ROOM 216
City-St-Zip: SARASOTA, FL 34234

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: HAVENS, JASON E
Address: 4400 EAST HIGHWAY 20, STE 211
City-St-Zip: NICEVILLE, FL 32578 US

Title: VC (X) Change () Addition
Name: COLE, RICHARD L
Address: 1720 ST. JAMES CIRCLE
City-St-Zip: THE VILLAGES, FL 32162 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: BRIDGET R. PALLANGO

C

05/01/2009

Electronic Signature of Signing Officer or Director

Date