

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43782

FILED
Jan 28, 2009
Secretary of State

Entity Name: FLORIDA COUNCIL OF INDEPENDENT SCHOOLS, INC.

Current Principal Place of Business:

1211 N WESTSHORE BLVD., SUITE 612
TAMPA, FL 33607

New Principal Place of Business:

1211 N WESTSHORE BLVD
SUITE 612
TAMPA, FL 33607

Current Mailing Address:

1211 N WESTSHORE BLVD., SUITE 612
TAMPA, FL 33607

New Mailing Address:

1211 N WESTSHORE BLVD
SUITE 612
TAMPA, FL 33607

FEI Number: 59-0816894

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLISS, C. SKARDON
1211 N WESTSHORE BLVD.
SUITE 612
TAMPA, FL 33607 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: D () Delete
Name: GEHMAN, RICHARD
Address: 8009 SW. 14 AVE
City-St-Zip: GAINSVILLE, FL 32607

Title: D () Delete
Name: HODGES, BARBARA
Address: 2001 FLEISCHMAN ROAD
City-St-Zip: TALLAHASSEE, FL 32308

Title: D () Delete
Name: FORD, CATHERINE
Address: 5625 HOLY TRINITY DRIVE
City-St-Zip: MELBOURNE, FL 32940

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HODGES, BARBARA
Address: 2001 FLEISCHMAN RD
City-St-Zip: TALLAHASSEE, FL 32308

Title: D (X) Change () Addition
Name: MAUGHAN, CRAIG
Address: 5700 TRINITY PREP LANE
City-St-Zip: WINTER PARK, FL 32792

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

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: SKARDON BLISS

D

01/28/2009

Electronic Signature of Signing Officer or Director

Date