2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47583

FILED Apr 28, 2006 Secretary of State

Entity Name: THE WINTER PARK HIGH SCHOOL FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business: 2100 SUMMERFIELD ROAD WINTER PARK, FL 32792 **Current Mailing Address: New Mailing Address:** 2100 SUMMERFIELD ROAD WINTER PARK, FL 32792 FEI Number: 59-3108692 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BAXA, SUSAN 425 GENIUS DRIVE WINTER PARK, FL 32789 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition BAXA, SUSAN BAXA, SUSAN E Name: Name: 425 GENIUS DRIVE Address: 425 GENIUS DRIVE Address: City-St-Zip: WINTER PARK, FL 32789 City-St-Zip: WINTER PARK, FL 32789 Title: PD Title: (X) Change () Addition () Delete KALISH, DEB Name: KALISH, DEBORAH Name: Address: 8317 AMBER OAK DRIVE Address: 8317 AMBER OAK DRIVE City-St-Zip: ORLANDO, FL 32817 City-St-Zip: ORLANDO, FL 32817 Title: VPD () Delete Title: () Change () Addition PORTELLI, LISA Name: Name: 2100 SUMMERFIELD ROAD Address: Address: City-St-Zip: WINTER PARK, FL 32792 City-St-Zip: Title: SD () Delete Title: () Change () Addition MCHENRY, LILA Name: Name: Address: 1910 OLD COLONY LANE Address: City-St-Zip: MAITLAND, FL 32751 City-St-Zip: Title: () Delete Title: () Change () Addition ACOSTA, LEE ANNE Name: Name: 2180 FORREST ROAD Address: Address: City-St-Zip: WINTER PARK, FL 32789 City-St-Zip: Title: () Delete Title: () Change () Addition GORDON, WILLIAM R II Name: Name: Address: 596 WATERSCAPE WAY Address: ORLANDO, FL 32828 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: SUSAN E. BAXA PD 04/28/2006