

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Oct 18, 2012
Secretary of State

DOCUMENT# N94000002636

Entity Name: FLORIDA TECHNOLOGY EDUCATION ASSOCIATION, INC.**Current Principal Place of Business:**1751 SW 110 TERRACE
DAVIE, FL 33324 US**New Principal Place of Business:**2251 BROOKSHIRE CIR.
MELBOURNE, FL 32904 US**Current Mailing Address:**1751 SW 110 TERRACE
DAVIE, FL 33324 US**New Mailing Address:**PO BOX 121614
MELBOURNE, FL 32912 US**FEI Number:** 65-0527676**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**CUMMINGS, THOMAS
1751 SW 110 TERRACE
DAVIE, FL 33324 US**Name and Address of New Registered Agent:**LAUER, JUSTIN
2251 BROOKSHIRE CIR
MELBOURNE, FL 32904 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: JUSTIN LAUER

10/18/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: BURLEW, GIL
Address: 2117 55TH AVENUE DR E
City-St-Zip: BRADENTON, FL 34203

Title: ED
Name: LAUER, JUSTIN
Address: 2251 BROOKSHIRE CIR.
City-St-Zip: MELBOURNE, FL 32904

Title: SD
Name: COLE, DANIEL
Address: 4143 ARROW AVE
City-St-Zip: SARASOTA, FL 34232

Title: TD
Name: GARRETT, VICKI
Address: 5301 10TH ST
City-St-Zip: MALONE, FL 32445

I hereby 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 all other like empowered.

SIGNATURE: JUSTIN LAUER

ED

10/18/2012

Electronic Signature of Signing Officer or Director

Date