

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000557

FILED  
Jan 05, 2012  
Secretary of State

**Entity Name:** TAYLOR COUNTY EDUCATION FOUNDATION, INC.

**Current Principal Place of Business:**

318 N CLARK ST.  
PERRY, FL 32347

**New Principal Place of Business:**

**Current Mailing Address:**

318 N CLARK ST.  
PERRY, FL 32347

**New Mailing Address:**

FEI Number: 59-3339186

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WALKER, JANICE P  
318 NORTH CLARK STREET  
PERRY, FL 32347 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: ED  
Name: WALKER, JANICE P  
Address: 318 N. CLARK ST.  
City-St-Zip: PERRY, FL 32347

Title: S  
Name: OLSON, CHRIS  
Address: 318 N. CLARK ST.  
City-St-Zip: PERRY, FL 32347

Title: D  
Name: DANIEL, BOB  
Address: 400 WEST GREEN  
City-St-Zip: PERRY, FL 32347

Title: T  
Name: MURPHY, JANICE P  
Address: 3233 HWY 19 S  
City-St-Zip: PERRY, FL 32348

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: JANICE P. MURPHY TREASURER

T

01/05/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date