

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006306

FILED
Mar 13, 2008
Secretary of State

Entity Name: GREATER SEMINOLE AREA SMALL BUSINESS EDUCATION FOUNDATION, INC.

Current Principal Place of Business:

8400 113TH STREET NORTH
SEMINOLE, FL 33772

New Principal Place of Business:

Current Mailing Address:

8400 113TH STREET NORTH
SEMINOLE, FL 33772

New Mailing Address:

FEI Number: 59-3596583

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, JAMES G
8400 113TH STREET
SEMINOLE, FL 33772 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: DT () Delete
Name: VARDY, HAROLD C
Address: 7122 SEMINOLE BLVD.
City-St-Zip: SEMINOLE, FL 33772

Title: D () Delete
Name: WILLIAMS, ROBIN
Address: 9808 ASHLEY DRIVE
City-St-Zip: SEMINOLE, FL 33772

Title: DP () Delete
Name: WATKINS, JOHN
Address: 11759 96TH PLACE
City-St-Zip: SEMINOLE, FL 33772

Title: V () Delete
Name: BLOCK, CHARLES H
Address: 17383 KENNEDY DR.
City-St-Zip: ST. PETERSBURG, FL 33708

Title: D () Delete
Name: OLLIVER, JAMES
Address: 8580 66TH STREET NORTH
City-St-Zip: PINELLAS PARK, FL 33665

Title: DS () Delete
Name: CATON, RICHARD P
Address: 7843 SEMINOLE BLVD.
City-St-Zip: SEMINOLE, FL 33772

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: JAMES G. JOHNSON

ED

03/13/2008

Electronic Signature of Signing Officer or Director

Date