2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 08:00 AM
Secretary of State

DOCUMENT # N98000002921

1. Entity Name
FOUNDATION FOR RURAL EDUCATION EXCELLENCE, INC.

Principal Place of Business	Mailing Address
3841 REID STREET PALATKA, FL 32177	3841 REID STREET PALATKA, FL 32177

DO NOT WRITE IN THIS SPACE

03162004 No Chg-NP CR2E037 (10/03)

4. FEI Number
59-3515342
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

STARLING, KEVIN SHAY
3841 REID STREET
PALATKA, FL 32177

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

U00000147503
05/03/04-80110-003 61.25

10. OFFICERS AND DIRECTORS

TITLE	MD
NAME	STARLING, KEVIN SHAY
STREET ADDRESS	3841 REID ST
CITY-ST-ZIP	PALATKA, FL 32177
TITLE	DP
NAME	WESTBURY, RICHARD
STREET ADDRESS	3841 REID ST
CITY-ST-ZIP	PALATKA, FL 32177
TITLE	DT
NAME	REED, CRAIG
STREET ADDRESS	3841 REID ST
CITY-ST-ZIP	PALATKA, FL 32177
TITLE	DS
NAME	MEETZE, ANNA
STREET ADDRESS	3841 REID ST
CITY-ST-ZIP	PALATKA, FL 32177
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Kevin Starling 4-27-04 (386) 329-3800
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #