2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 03, 2006
Secretary of State

DOCUMENT# N98000002921

Entity Name: FOUNDATION FOR RURAL EDUCATION EXCELLENCE, INC.

Current Principal Place of Business:

3841 REID STREET
PALATKA, FL 32177

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 756
PALATKA, FL 32178

New Mailing Address:

FEI Number: 59-3515342 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STARLING, KEVIN SHAY
3841 REID STREET
PALATKA, FL 32177 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: MD ( ) Delete
Name: STARLING, KEVIN SHAY
Address: 3841 REID ST
City-St-Zip: PALATKA, FL 32177

Title: DP ( ) Delete
Name: WESTBURY, RICHARD
Address: 286 ROUND LAKE RD
City-St-Zip: PALATKA, FL 32177

Title: DT ( ) Delete
Name: REED, CRAIG
Address: 2905 MEADOWS LANE
City-St-Zip: PALATKA, FL 32177

Title: DS ( ) Delete
Name: MEETZE, ANNA
Address: 3841 REID ST
City-St-Zip: PALATKA, FL 32177

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: DT (X) Change ( ) Addition
Name: WEBB, MARY ELLEN
Address: 2905 MEADOWS LANE
City-St-Zip: PALATKA, FL 32177

Title: ( ) Change ( ) Addition
Name:
Address:
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: KEVIN SHAY STARLING MD 01/03/2006

Electronic Signature of Signing Officer or Director — Date