2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002921

FILED Feb 09, 2009 Secretary of State

Entity Name: FOUNDATION FOR RURAL EDUCATION EXCELLENCE, INC.

Current P	Principal Place of Business:	New Principal Place of Business:
	O STREET , FL 32177	
Current N	lailing Address:	New Mailing Address:
P.O. BOX PALATKA	756 , FL 32178	
FEI Number	: 59-3515342 FEI Number Applied For	() FEI Number Not Applicable () Certificate of Status Desired ()
Name and	d Address of Current Registered Age	ent: Name and Address of New Registered Agent:
3841 REID	G, KEVIN SHAY D STREET , FL 32177 US	
-		
	e named entity submits this statement fo e of Florida.	or the purpose of changing its registered office or registered agent, or both,
n the Stat	e of Florida.	or the purpose of changing its registered office or registered agent, or both,
n the Stat	e of Florida.	
in the Stat SIGNATU	e of Florida.	
n the Stat BIGNATU DFFICER Fitle: Name: Address:	e of Florida. RE: Electronic Signature of Register	ed Agent Date
in the Stat	e of Florida. RE: Electronic Signature of Register S AND DIRECTORS: MD () Delete STARLING, KEVIN SHAY 3841 REID ST	ed Agent Date ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR Title: () Change () Addition Name: Address:
in the Stat SIGNATU OFFICER Title: Name: Address: City-St-Zip: Title: Name: Address:	e of Florida. RE: Electronic Signature of Registers S AND DIRECTORS: MD () Delete STARLING, KEVIN SHAY 3841 REID ST PALATKA, FL 32177 DP () Delete WESTBURY, RICHARD 286 ROUND LAKE RD	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address:

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: ANNA MEETZE SEC 02/09/2009