2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003423

FILED Mar 28, 2012 Secretary of State

Entity Name: A GIFT FOR TEACHING, INC.

Current Principal Place of Business: New Principal Place of Business:

6501 MAGIC WAY BLDG. 400C

ORLANDO, FL 32809 US

Current Mailing Address: New Mailing Address:

6501 MAGIC WAY BLDG. 400C

ORLANDO, FL 32809 US

FEI Number: 59-3515162 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

THOMPSON, JANE 6501 MAGIC WAY BLDG. 400C

ORLANDO, FL 32809 US

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:

Name: THOMPSON. JANE

Address: 6501 MAGIC WAY BLDG 400 C

City-St-Zip: ORLANDO, FL 32809

Title: DS

Name: MUSE, DEBBIE

Address: 1303 BLACK WILLOW TRAIL
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: DC

Name: PARADIS, AMANDA Address: 4331 ETHAN LANE City-St-Zip: ORLANDO, FL 32814

Title: DVC

Name: NEBEL, KARL

Address: 1201 S. ORANGE AVENUE #420 City-St-Zip: WINTER PARK, FL 32789

Title:

Name: THIELHELM, ROBERT W

Address: 200 S. ORANGE AVENUE SUITE 2300

City-St-Zip: ORLANDO, FL 32801

Title: DT

Name: BILL, FLUKE

Address: 420 S. ORANGE AVENUE City-St-Zip: ORLANDO, FL 32801

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: JANE THOMPSON PRES 03/28/2012