


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2007 8:00 am
Secretary of State

01-18-2007 90088 007 ****70.00

DOCUMENT # N24220
 1. Entity Name
FLORIDA EDUCATION FUND, INC.



40002727

Principal Place of Business Mailing Address
 201 ~~210~~ E KENNEDY BLVD. 201 ~~210~~ E KENNEDY BLVD.
 SUITE 1525 SUITE 1525
 TAMPA, FL 33602 TAMPA, FL 33602

DO NOT WRITE IN THIS SPACE



01042007 No Chg-NP CR2E037 (4/06)

4. FEI Number Applied For
59-2783821 Not Applicable

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

6. Name and Address of Current Registered Agent
 MOREHOUSE, LAWRENCE
 FLORIDA EDUCATION FUND, INC.
 201 E. KENNEDY BLVD., SUITE 1525
 TAMPA, FL 33602

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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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

Filing Fee is \$61.25
Due by May 1, 2007

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

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	CARR, ELLIOTT L
STREET ADDRESS	2800 59TH CIRCLE SOUTH
CITY-ST-ZIP	SAINT PETERSBURG, FL 33712
TITLE	D
NAME	NIXON, ROBERT L DR
STREET ADDRESS	14158 FENNSBURY DRIVE
CITY-ST-ZIP	TAMPA, FL 336242597
TITLE	D
NAME	BENSON, HAYWARD J JR DR
STREET ADDRESS	4410 NW 67TH TERRACE
CITY-ST-ZIP	LAUDERHILL, FL 33319
TITLE	CD
NAME	CRAWFORD, CARL M DR
STREET ADDRESS	2737 NW 24TH AVENUE
CITY-ST-ZIP	FORT LAUDERDALE, FL 33311
TITLE	P
NAME	MOREHOUSE, LAWRENCE
STREET ADDRESS	201 E KENNEDY BLVD., SUITE 1525
CITY-ST-ZIP	TAMPA, FL 33602
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 exemptions contained 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 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: Lawrence Morehouse Date: 8-13-2007-2772
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

Lawrence Morehouse President/CEO