

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03622

Entity Name: SOUTH FLORIDA STATE COLLEGE FOUNDATION INC.**Current Principal Place of Business:**13 E MAIN ST
AVON PARK, FL 33825**Current Mailing Address:**13 E MAIN ST
AVON PARK, FL 33825 US**FEI Number:** 59-3050497**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KARLSON, PAMELA T ATTY
301 DAL HALL BOULEVARD
LAKE PLACID, FL 33852 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:** PAMELA T KARLSON

04/17/2013

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name MECHLIN, JEFFREY
Address 3091 N. TWIN LAKES
City-State-Zip: AVON PARK FL 33825

Title VP
Name CREWS, CHRISTY
Address P.O. BOX 1961
City-State-Zip: AVON PARK FL 33826

Title S
Name CARRUTHERS, MERCEDES
Address 3033 HAWKS LANDING CIRCLE
City-State-Zip: SEBRING FL 33875

Title T
Name WEEKS, ROBIN
Address 868 MANLEY ROAD
City-State-Zip: WAUCHULA FL 33873

Title D
Name JARRETT, WILLIAM
Address 1305 U.S. HIGHLANDS 27 NORTH
City-State-Zip: AVON PARK FL 33825

Title D
Name SACCO, JOEY B
Address 217 US HIGHWAY 27 NORTH
City-State-Zip: SEBRING FL 33870

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: JOEY B SACCO**DIRECTOR**

04/17/2013

Electronic Signature of Signing Officer/Director Detail

Date