2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000010106

Entity Name: BLUEBIRD EDUCATIONAL FOUNDATION, INC.

Current Principal Place of Business:

809 DELAWARE AVE
FT PIERCE, FL 34950

Current Mailing Address:

809 DELAWARE AVE
FT PIERCE, FL 34950

FEI Number: 30-0537905

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BEY, DARRYL
809 DELAWARE AVE.
FORT PIERCE, FL 34950 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: DARRYL BEY   04/20/2025

Electronic Signature of Registered Agent   Date

Officer/Director Detail :

Title	PRESIDENT EMERITUS		Title	TREASURER
Name	BEY, DARRYL		Name	SHAFER, THEODORE CHARLES ESQ.
Address	809 DELAWARE AVE.		Address	809 DELAWARE AVE.
City-State-Zip:	FORT PIERCE FL 34950		City-State-Zip:	FORT PIERCE FL 34950
Title	PRESIDENT		Title	SECRETARY
Name	BEY, DARRYL		Name	ROESSLER, JANET
Address	809 DELAWARE AVE.		Address	809 DELAWARE AVE.
City-State-Zip:	FORT PIERCE FL 34950		City-State-Zip:	FORT PIERCE FL 34950
Title	DIRECTOR		Title	DIRECTOR
Name	CONFANCES, WILLIAM		Name	DURKIN, MARY ANN
Address	809 DELAWARE AVE.		Address	809 DELAWARE AVE.
City-State-Zip:	FORT PIERCE FL 34950		City-State-Zip:	FORT PIERCE FL 34950
Title	DIRECTOR			
Name	WILCOX, GERALD			
Address	809 DELAWARE AVE.			
City-State-Zip:	FORT PIERCE FL 34950			

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: THEODORE CHARLES SHAFER   TREASURER   04/20/2025

Electronic Signature of Signing Officer/Director Detail   Date