### 2019 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000004591

**Entity Name: HELIOS EDUCATION FOUNDATION INCORPORATED** 

**FILED** Feb 08, 2019 **Secretary of State** 9417021124CC

# **Current Principal Place of Business:**

2415 EAST CAMELBACK RD SUITE 500 PHOENIX, AZ 85016

## **Current Mailing Address:**

2415 EAST CAMELBACK RD SUITE 500 PHOENIX, AZ 85016

FEI Number: 94-2850977 Certificate of Status Desired: No

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

HOKANSON, CHARLES 101 EAST KENNEDY **SUITE 2050** TAMPA, FL 33602 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: CHARLES HOKANSON 02/08/2019

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

500

Title **CHAIRMAN** Title DIRECTOR Name ROIG, VINCENT Name HERNDON, TOM

2415 EAST CAMELBACK RD SUITE Address Address 2415 EAST CAMELBACK RD SUITE

PHOENIX AZ 85016 City-State-Zip:

City-State-Zip: PHOENIX AZ 85016

Title **DIRECTOR** Title PRESIDENT AND DIRECTOR

Name ARIPOLI, DON Name LUNA, PAUL

Address 2415 EAST CAMELBACK RD SUITE Address 2415 EAST CAMELBACK RD SUITE

City-State-Zip: PHOENIX AZ 85016 City-State-Zip: PHOENIX AZ 85016

Title **EXECUTIVE VICE PRESIDENT** Title CFO AND VICE PRESIDENT

RYAN THOMPSON, BARBARA CHESIN, MICHAEL Name Name

2415 EAST CAMELBACK RD SUITE Address Address 2415 EAST CAMELBACK RD SUITE

City-State-Zip: PHOENIX AZ 85016 City-State-Zip: PHOENIX AZ 85016

Title **DIRECTOR** Title **DIRECTOR** 

Name ROIG, JANE Name FERNANDEZ. MARK

Address 2415 EAST CAMELBACK RD Address 2415 EAST CAMELBACK RD

SUITE 500 SUITE 500

PHOENIX AZ 85016 PHOENIX AZ 85016 City-State-Zip: City-State-Zip:

### Continues on page 2

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: MICHAEL CHESIN SR VICE PRESIDENT 02/08/2019

## Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name SASTRE, MARIA Name MORFESSIS, IOANNA

Address 2415 EAST CAMELBACK RD Address 2415 EAST CAMELBACK RD

SUITE 500 SUITE 500

City-State-Zip: PHOENIX AZ 85016 City-State-Zip: PHOENIX AZ 85016

Title DIRECTOR Title SR VICE PRESIDENT

Name WHEELER, STEVEN Name THOMPSON, LINDA

Address 2415 EAST CAMELBACK RD Address 2415 EAST CAMELBACK RD

SUITE 500 SUITE 500

City-State-Zip: PHOENIX AZ 85016 City-State-Zip: PHOENIX AZ 85016

Title SR VICE PRESIDENT Title DIRECTOR

Name HOKANSON, CHARLES Name MANAGER, VADA

Address 101 E. KENNEDY BLVD Address 2415 EAST CAMELBACK RD

SUITE 2050 SUITE 500

City-State-Zip: TAMPA FL 33602 City-State-Zip: PHOENIX AZ 85016