Electronic Signature of Signing Officer/Director Detail

2015 FOREIGN NOT FOR	PROFIT CORPORATION A	NNUAL REPORT

DOCUMENT# F07000004591

Entity Name: HELIOS EDUCATION FOUNDATION INCORPORATED

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

Name and Address of Current Registered Agent:

SMITH, IAN 100 N TAMPA ST **SUITE 1625** 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:

Electronic Signature of Registered Agent

Officer/Director Detail

Officer/Director Detail :					
Title	CHAIRMAN	Title	DIRECTOR		
Name	ROIG, VINCENT	Name	HERNDON, TOM		
Address	2415 EAST CAMELBACK RD SUITE 500	Address	2415 EAST CAMELBACK RD SUITE 500		
City-State-Zip:	PHOENIX AZ 85016	City-State-Zip:	PHOENIX AZ 85016		
Title	DIRECTOR	Title	PRESIDENT AND DIRECTOR		
Name	ARIPOLI, DON	Name	LUNA, PAUL		
Address	2415 EAST CAMELBACK RD SUITE 500	Address	2415 EAST CAMELBACK RD SUITE 500		
City-State-Zip:	PHOENIX AZ 85016	City-State-Zip:	PHOENIX AZ 85016		
Title	EXECUTIVE VICE PRESIDENT	Title	CFO AND VICE PRESIDENT		
Name	RYAN THOMPSON, BARBARA	Name	CHESIN, MICHAEL		
Address	2415 EAST CAMELBACK RD SUITE 500	Address	2415 EAST CAMELBACK RD SUITE 500		
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 SUITE 500	Address	2415 EAST CAMELBACK RD SUITE 500		
City-State-Zip:	PHOENIX AZ 85016	City-State-Zip:	PHOENIX AZ 85016		

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

01/06/2015

Date

FILED Jan 06, 2015 Secretary of State CC4575920381

Certificate of Status Desired: No

Date

Officer/Director Detail Continued :

Title	VICE PRESIDENT	Title	DIRECTOR
Name	SMITH, IAN	Name	SASTRE, MARIA
Address	2415 EAST CAMELBACK RD SUITE 500	Address	2415 EAST CAMELBACK RD SUITE 500
City-State-Zip:	PHOENIX AZ 85016	City-State-Zip:	PHOENIX AZ 85016
Title	DIRECTOR	Title	DIRECTOR
Name	MORFESSIS, IOANNA	Name	WHEELER, STEVEN
Address	2415 EAST CAMELBACK RD SUITE 500	Address	2415 EAST CAMELBACK RD SUITE 500
City-State-Zip:	PHOENIX AZ 85016	City-State-Zip:	PHOENIX AZ 85016
Title	SR VICE PRESIDENT - COMMUNITY IMPACT	Title	SR VICE PRESIDENT, POLICY
Name	THOMPSON, LINDA	Name	HOKANSON, CHARLES
Address	2415 EAST CAMELBACK RD SUITE 500	Address	2415 EAST CAMELBACK RD SUITE 500
City-State-Zip:	PHOENIX AZ 85016	City-State-Zip:	PHOENIX AZ 85016
Title	DIRECTOR		
Name	MANAGER, VADA		
Address	2415 EAST CAMELBACK RD		

- 2415 EAST CAMELBACK RD SUITE 500
- City-State-Zip: PHOENIX AZ 85016