

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004182

FILED
Apr 30, 2012
Secretary of State

Entity Name: COMMUNITY FOUNDATION OF EAST CENTRAL FLORIDA, INC.

Current Principal Place of Business:

411 GLEN ABBEY LN.
DEBARY, FL 32713

New Principal Place of Business:

253 HAZELTINE DR.
DEBARY, FL 32713

Current Mailing Address:

P.O. BOX 523
DELAND, FL 327210523 US

New Mailing Address:

FEI Number: 59-3663309 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHMELICK, NITA
411 GLEN ABBEY LANE
DEBARY, FL 32713 US

Name and Address of New Registered Agent:

SCHMELICK, NITA
253 HAZELTINE DR.
DEBARY, FL 32713 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

04/30/2012

Date

OFFICERS AND DIRECTORS:

Title: CEO
Name: SCHMELICK, NITA
Address: 253 HAZELTINE DR.
City-St-Zip: DEBARY, FL 32713

Title: PD
Name: BURTON, ALAN
Address: 915 OCEAN SHORE BLVD SUITE 707
City-St-Zip: ORMOND BEARCH, FL 32176

Title: VPD
Name: WARD, RANDALL
Address: 17 WILDWOOD TRAIL
City-St-Zip: ORMOND BEACH, FL 32174

Title: TD
Name: CLARK, LAURA LEE
Address: 466 FORT FLORIDA RD
City-St-Zip: DEBARY, FL 32713

Title: SD
Name: YOUNG, JULIE
Address: 1242 HAMPSTEAD LANE
City-St-Zip: DEBARY, FL 32176

Title: D
Name: MARTIN, CAROLYN
Address: 835 GATOR LANE
City-St-Zip: DELTONA, FL 32138

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: NITA SCHMELICK

CEO

04/30/2012

Electronic Signature of Signing Officer or Director

Date