2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 06, 2004
Secretary of State

DOCUMENT# 712633

Entity Name: BETHUNE-COOKMAN COLLEGE, INC.

Current Principal Place of Business:

640 MARY MCLEOD BETHUNE BLVD
DAYTONA BEACH, FL 321143099

New Principal Place of Business:

Current Mailing Address:

640 MARY MCLEOD BETHUNE BLVD
DAYTONA BEACH, FL 321143099

New Mailing Address:

FEI Number: 59-0704726 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MONTGOMERY, E. DEAN
640 MARY MCLEOD BETHUNE BLVD
DAYTONA BEACH, FL 321143099 US

Name and Address of New Registered Agent:

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 — Date

OFFICERS AND DIRECTORS:

Title:	T	( ) Delete
Name:	MARSHALL, STANLEY J DR	
Address:	640 MARY MCLEOD BETHUNE BLVD	
City-St-Zip:	DAYTONA BEACH, FL 32114	
Title:	AV	( ) Delete
Name:	PATEL, KIRIT A	
Address:	640 MARY MCLEOD BETHUNE BLVD	
City-St-Zip:	DAYTONA BEACH, FL 32114	
Title:	T	( ) Delete
Name:	RYDELL, KATHLEEN	
Address:	640 MARY MCLEOD BETHUNE BLVD	
City-St-Zip:	DAYTONA BEACH, FL 321143099	
Title:	T	( ) Delete
Name:	MASSEY, MARY ALICE	
Address:	6750 EPPING FOREST WAY N #106	
City-St-Zip:	JACKSONVILLE, FL 32207	
Title:	P	( ) Delete
Name:	BRONSON, OSWALD P SR., DR	
Address:	640 MARY MCLEOD BETHUNE BLVD	
City-St-Zip:	DAYTONA BEACH, FL 321143099	
Title:	V	( ) Delete
Name:	MONTGOMERY, E. DEAN	
Address:	640 MARY MCLEOD BETHUNE BLVD	
City-St-Zip:	DAYTONA BEACH, FL 321143099	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: E DEAN MONTGOMERY MR 08/06/2004

Electronic Signature of Signing Officer or Director — Date