2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2009
Secretary of State

DOCUMENT# N07000011457

Entity Name: EDISON COLLEGE FINANCING CORPORATION

Current Principal Place of Business:

8099 COLLEGE PARKWAY
FORT MYERS, FL 33919

New Principal Place of Business:

Current Mailing Address:

PO BOX 60210
FORT MYERS, FL 33906

New Mailing Address:

FEI Number: 26-1591757 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WALKER, KENNETH P
8099 COLLEGE PARKWAY
FORT MYERS, FL 33919 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: C ( ) Delete
Name: HOUGHTON, MAHLAN MR.
Address: 8099 COLLEGE PARKWAY
City-St-Zip: FORT MYERS, FL 33919

Title: VC ( ) Delete
Name: MILLER, WAYNE T MR.
Address: 8099 COLLEGE PARKWAY
City-St-Zip: FORT MYERS, FL 33919

Title: P ( ) Delete
Name: WALKER, KENNETH P DR.
Address: 8099 COLLEGE PARKWAY
City-St-Zip: FORT MYERS, FL 33919

Title: T ( ) Delete
Name: THOMAS, NOREEN DR.
Address: 8099 COLLEGE PARKWAY
City-St-Zip: FORT MYERS, FL 33919

Title: S ( ) Delete
Name: PENDLETON, EDITH DR.
Address: 8099 COLLEGE PARKWAY
City-St-Zip: FORT MYERS, FL 33919

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:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: DR. EDITH PENDLETON S 01/23/2009
Electronic Signature of Signing Officer or Director — Date