

**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 14, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # P00000095579  
 1. Entity Name  
 KENDALL EDUCATIONAL SERVICES, INC.



Principal Place of Business: 1321 MURFREESBORO RD, STE 702 NASHVILLE, TN 37217  
 Mailing Address: 1321 MURFREESBORO RD, STE 702 NASHVILLE, TN 37217

**DO NOT WRITE IN THIS SPACE**



03012005 No Chg-P CR2E034 (10/03)

4. FEI Number: 62-1836071  
 Applied For:  Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
 NRAI SERVICES, INC.  
 2731 EXECUTIVE PARK DRIVE  
 SUITE 4  
 WESTON, FL 33331

**DO NOT WRITE IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution:  \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PCEO
NAME	CLAYPOOL, MARK
STREET ADDRESS	1321 MURFREESBORO RD STE 702
CITY-ST-ZIP	NASHVILLE, TN 37217
TITLE	EVPO
NAME	ALLGOOD, ALVIN
STREET ADDRESS	1321 MURFREESBORO RD STE 702
CITY-ST-ZIP	NASHVILLE, TN 37217
TITLE	EVPC
NAME	WHITFIELD, DONALD
STREET ADDRESS	1321 MURFREESBORO RD, STE 702
CITY-ST-ZIP	NASHVILLE, TN 37217
TITLE	CEDO
NAME	CARNER, ZELDA
STREET ADDRESS	1321 MURFREESBORO RD, STE 702
CITY-ST-ZIP	NASHVILLE, TN 37217
TITLE	VPQ
NAME	CONTE, ALICE
STREET ADDRESS	1321 MURFREESBORO RD, STE 702
CITY-ST-ZIP	NASHVILLE, TN 37217
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

000000305243  
 04.14.05-80076-013 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Donald B. Whitfield Donald B. WHITFIELD 4/11/05  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #