

**2001 UNIFORM BUSINESS REPORT (UBR)****FILED****Apr 26, 2001 08:00 AM**  
**Secretary of State****DOCUMENT # 330980**1. Entity Name  
SOUTHERN COLLEGE, INC.

## Principal Place of Business

5600 LAKE UNDERHILL ROAD

ORLANDO FLA

328078647

## Mailing Address

233 ACADEMY DRIVE

P O BOX 421768

KISSIMMEE

347421768

US

FL

## 2. Principal Place of Business

5600 LAKE UNDERHILL ROAD

## 3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

## City &amp; State

ORLANDO

FL

## City &amp; State

## Zip

328078647

## Country

## Zip

## Country

## 4. FEI Number

59-1212281

## Applied For

Not Applicable

## 5. Certificate of Status Desired

**\$8.75** Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

## 6. Name and Address of Current Registered Agent

PEOPLES, DAVID L.  
233 ACADEMY DRIVE

KISSIMMEE

347445669

FL

## 7. Name and Address of New Registered Agent

## Name

## Street Address (P.O. Box Number is Not Acceptable)

## City

FL

## Zip Code

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.

SIGNATURE **DAVID L PEOPLES****04/26/2001**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☒**FILE NOW!!! FEE IS \$150.00****After MAY 1, 2001 Fee will be \$550.00****Make Check Payable to Department of State**10. Election Campaign Financing  
Trust Fund Contribution. ☐**\$5.00** May Be  
Added to Fees

## 11. OFFICERS AND DIRECTORS

TITLE AS ☐ Delete  
NAME PEOPLES ANNE W.  
STREET ADDRESS 233 ACADEMY DRIVE  
CITY-ST-ZIP KISSIMMEE FLTITLE VPTS ☒ Delete  
NAME PEOPLES D KEITH  
STREET ADDRESS 233 ACADEMY DRIVE  
CITY-ST-ZIP KISSIMMEE FLTITLE AS ☐ Delete  
NAME PEOPLES, PAUL T  
STREET ADDRESS 233 ACADEMY DRIVE  
CITY-ST-ZIP KISSIMMEE, FL 00000TITLE PD ☐ Delete  
NAME PEOPLES, DAVID L  
STREET ADDRESS 233 ACADEMY DRIVE  
CITY-ST-ZIP KISSIMMEE, FL 00000TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE V/S ☒ Change ☐ Addition  
NAME PEOPLES ANNE W  
STREET ADDRESS 233 ACADEMY DRIVE  
CITY-ST-ZIP KISSIMMEE FL 34744TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE AS/V ☒ Change ☐ Addition  
NAME PEOPLES PAUL T  
STREET ADDRESS 233 ACADEMY DRIVE  
CITY-ST-ZIP KISSIMMEE, FL 34744TITLE PD/T ☒ Change ☐ Addition  
NAME PEOPLES DAVID L  
STREET ADDRESS 233 ACADEMY DRIVE  
CITY-ST-ZIP KISSIMMEE, FL 34744TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **David L Peoples**

PD/V

04/26/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)