

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704449

FILED
Feb 05, 2009
Secretary of State

Entity Name: ECKERD COLLEGE, INC.

Current Principal Place of Business:

4200 54TH AVENUE SOUTH
ST PETERSBURG, FL 33711

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 12560
ST PETERSBURG, FL 33733

New Mailing Address:

FEI Number: 59-0859121

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIDGE, GEORGE E
COOPER, RIDGE & LATINBERG, P.A.
136 EAST BAY STREET, SUITE 301
JACKSONVILLE, FL 32202 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: D () Delete
Name: ADAMS, PAYTON MR
Address: 2834 PELHAM RD NORTH
City-St-Zip: SAINT PETERSBURG, FL 33710

Title: T () Delete
Name: BRENNAN, CHRISTOPHER P
Address: 4200 54TH AVENUE S
City-St-Zip: SAINT PETERSBURG, FL 33711

Title: VP () Delete
Name: CHAPIN, LLOYD W
Address: 4200 54TH AVE S
City-St-Zip: SAINT PETERSBURG, FL 33711

Title: D () Delete
Name: OFF, GEORGE W MR
Address: 101 WOLF DRIVE
City-St-Zip: THOROFARE, NJ 08086

Title: D () Delete
Name: RISSER, P.N. MR
Address: 2865 EXECUTIVE CENTER DRIVE
City-St-Zip: CLEARWATER, FL 33762

Title: P () Delete
Name: EASTMAN, DONALD P
Address: 4200 54TH AVENUE S
City-St-Zip: SAINT PETERSBURG, FL 33711

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
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City-St-Zip:

Title: () Change () Addition
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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: CHRISTOPHER P. BRENNAN

T

02/05/2009

Electronic Signature of Signing Officer or Director

Date