

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 707232

FILED
Mar 05, 2007
Secretary of State

Entity Name: WARNER SOUTHERN COLLEGE, INC.

Current Principal Place of Business:

13895 HIGHWAY 27
LAKE WALES, FL 33859

New Principal Place of Business:

Current Mailing Address:

13895 HIGHWAY 27
LAKE WALES, FL 33859

New Mailing Address:

FEI Number: 59-1275800

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

RODDEN, GREGORY A
13895 HIGHWAY 27
LAKE WALES, FL 33859 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: VT () Delete
Name: RODDEN, GREGORY A
Address: 4813 AVON ST
City-St-Zip: LAKE WALES, FL 33853

Title: CD () Delete
Name: DODSON, HARVEY
Address: PO BOX 7646
City-St-Zip: VERO BEACH, FL 32960

Title: P () Delete
Name: HALL, GREGORY,
Address: 1147 S. LAKESHORE BLVD
City-St-Zip: LAKE WALES, FL 33853

Title: V () Delete
Name: RIGEL, BILL
Address: 242 S LAKESHORE
City-St-Zip: LAKE WALES, FL 33853

Title: D () Delete
Name: CLAUSSEN, JIM
Address: 185 BRWONING CIRCLE, SE
City-St-Zip: WINTER HAVEN, FL 33884

Title: D () Delete
Name: CARLILE, CLEO
Address: 608 W. 15TH ST
City-St-Zip: BIG SPRING, TX 79720

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: QUAM, ROBERT K
Address: 710 CARLTON AVE
City-St-Zip: LAKE WALES, FL 33853

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 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: GREGORY A RODDEN

VT

03/05/2007

Electronic Signature of Signing Officer or Director

Date