2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2004
Secretary of State

DOCUMENT# 749551

Entity Name: SOUTHEAST ACCREDITING ASSOCIATION OF CHRISTIAN SCHOOLS, COLLEGES, AND SEMINARIES, INC.

Current Principal Place of Business:

6423 HAMILTON BRIDGE RD.
MILTON, FL 32570

New Principal Place of Business:

Current Mailing Address:

6423 HAMILTON BRIDGE RD.
MILTON, FL 32570

New Mailing Address:

FEI Number: 59-6554316 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BOYD, CHARLES W
6020 KINGSWOOD DR
MILTON, FL 32570

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:	DV	( ) Delete
Name:	KELLEY, RANDAL H	
Address:	6826 MERTIS WAY	
City-St-Zip:	MILTON, FL 32583	
Title:	DP	( ) Delete
Name:	BOYD, CHARLES W	
Address:	6020 KINGSWOOD DR	
City-St-Zip:	MILTON, FL 32570	
Title:	D	( ) Delete
Name:	JOHNSON, JIMMY L	
Address:	4380 PONDEROSA DR	
City-St-Zip:	MILTON, FL 32583	
Title:	ST	( ) Delete
Name:	GUNTON, JOHN,	
Address:	6622 HINOTE ST	
City-St-Zip:	MILTON, FL 32570	
Title:	D	( ) Delete
Name:	SMITH, ROBERT J	
Address:	4252 BURBANK DR	
City-St-Zip:	MILTON, FL 32583	
Title:	D	( ) Delete
Name:	BOHANNON, WILLIAM R	
Address:	5899 INDEPENDENCE DR	
City-St-Zip:	MILTON, FL 32570	

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:	T	(X) Change ( ) Addition
Name:	LUNSFORD, ROBERT L	
Address:	5466 RUSSELL DR.	
City-St-Zip:	MILTON, FL 32570	
Title:	D	(X) Change ( ) Addition
Name:	JONES, JAMES H	
Address:	5134 PARKWAY DR	
City-St-Zip:	MILTON, FL 32570	
Title:	SD	(X) Change ( ) Addition
Name:	BOHANNON, WILLIAM R	
Address:	5899 INDEPENDENCE DR	
City-St-Zip:	MILTON, FL 32570	

I hereby certify that the information supplied with this filing does not qualify for the 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 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: WILLIAM R. BOHANNON S 04/24/2004

Electronic Signature of Signing Officer or Director — Date