

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000000159

FILED  
Jul 06, 2004  
Secretary of State

Entity Name: SUNTRUST EDUCATION FINANCIAL SERVICES CORPORATION

**Current Principal Place of Business:**

919 EAST MAIN STREET, 18TH FLOOR  
RICHMOND, VA 23219

**New Principal Place of Business:**

1001 SEMMES AVENUE  
RICHMOND, VA 23224

**Current Mailing Address:**

919 EAST MAIN STREET, 18TH FLOOR  
RICHMOND, VA 23219

**New Mailing Address:**

1001 SEMMES AVENUE  
RICHMOND, VA 23224

FEI Number: 54-1921229

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PRES ( ) Delete  
Name: THOMAS, MARKE A  
Address: 1001 SEMMES AVENUE - 5TH FLOOR  
City-St-Zip: RICHMOND, VA 23224 US

Title: VP ( ) Delete  
Name: HAZEL, MARY ELLEN  
Address: 1001 SEMMES AVENUE - 5TH FLOOR  
City-St-Zip: RICHMOND, VA 23224 US

Title: AS ( ) Delete  
Name: BRUCE, DANA S  
Address: 919 EAST MAIN STREET, 18TH FLOOR  
City-St-Zip: RICHMOND, VA 23219

Title: S ( ) Delete  
Name: RIGSBY, LINDA F  
Address: 919 EAST MAIN STREET, 18TH FLOOR  
City-St-Zip: RICHMOND, VA 23219

Title: D ( ) Delete  
Name: REYNOLDS, KEITH  
Address: 303 PEACHTREE ST., NE, SUITE 2950  
City-St-Zip: ATLANTA, GA 30308

Title: D ( ) Delete  
Name: WARD, SHERRY A  
Address: 1001 SEMMES AVENUE, 5TH FLOOR  
City-St-Zip: RICHMOND, VA 23224

**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  
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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARKE A. THOMAS

PRES

07/06/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date

MARKE A THOMAS, DIRECTOR  
1001 SEMMES AVENUE - 5TH FLOOR  
RICHMOND, VA 23224