ANNUAL REPORT
1995

Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F94000002334 (0)

1. Corporation Name
EDUCATION FINANCE CENTER, INC.

Principal Place of Business	Mailing Address
1080 THOMAS JEFFERSON ST., NW WASHINGTON DE 20007	1080 THOMAS JEFFERSON ST., NW WASHINGTON DE 20007 c/o Lucy Weymouth

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 05/05/1994
3a. Date of Last Report:

2. Principal Place of Business
21 5100 West Lemon Street
Suite, Apt. #, etc. 22
City & State 23 Tampa, Florida
Zip 24 33609 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc. 27
City & State 28 Washington, DC
Zip 29 Country 30

4. FEI Number: 59-3238373 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when reinstating.

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	11 TITLE	V	☐ Change ☒ Addition
NAME	MCCORMACK, JUNE M	12 NAME	Benson, Taft E.	
STREET ADDRESS	1050 THOMAS JEFFERSON ST., NW	13 STREET ADDRESS	1050 Thomas Jefferson St., N.W.	
CITY-ST-ZIP	WASHINGTON DC 20007	14 CITY-ST-ZIP	Washington, D.C. 20007	
TITLE	S	21 TITLE	S	XX Change ☒ Addition
NAME	CZULOWSKI, ANN MARIE P	22 NAME	Weymouth, Lucy C.	
STREET ADDRESS	1050 THOMAS JEFFERSON ST., NW	23 STREET ADDRESS	1050 Thomas Jefferson St., N.W.	
CITY-ST-ZIP	WASHINGTON DC 20007	24 CITY-ST-ZIP	Washington, D.C. 20007	
TITLE	AS	31 TITLE	V	☐ Change ☒ Addition
NAME	INGRAM, WILLIAM	32 NAME	Black, Gary A.	
STREET ADDRESS	1050 THOMAS JEFFERSON ST., NW	33 STREET ADDRESS	5100 West Lemon St.	
CITY-ST-ZIP	WASHINGTON DC 20007	34 CITY-ST-ZIP	Tampa, FL 33609	
TITLE	D	41 TITLE	V	☐ Change ☒ Addition
NAME	MARSHALL, LYDIA M	42 NAME	Brown, Gary J.	
STREET ADDRESS	1050 THOMAS JEFFERSON ST., NW	43 STREET ADDRESS	5100 West Lemon St.	
CITY-ST-ZIP	WASHINGTON DC 20007	44 CITY-ST-ZIP	Tampa, FL 33609	
TITLE	D	51 TITLE	V	☐ Change ☒ Addition
NAME	REPP, SHELDON D	52 NAME	Freedman, Teresa R.	
STREET ADDRESS	1050 THOMAS JEFFERSON ST., NW	53 STREET ADDRESS	5100 West Lemon St.	
CITY-ST-ZIP	WASHINGTON DC 20007	54 CITY-ST-ZIP	Tampa, FL 33609	
TITLE		61 TITLE	V	☐ Change ☒ Addition
NAME		62 NAME	Amerman, Bonnie S.	
STREET ADDRESS		63 STREET ADDRESS	5100 West Lemon St.	
CITY-ST-ZIP		64 CITY-ST-ZIP	Tampa, FL 33609	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Lucy Weymouth Lucy Weymouth 4-25-95 (602) 298-3141
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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Continuation Sheet

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (cont.)	
7.1 Title	V ☐ Change ■ Addition
7.2 Name	Gathard, James W.
7.3 Street Address	1050 Thomas Jefferson St, N.W
7.4 City-ST-ZIP	Washington, D.C. 20007
8.1 Title	V ☐ Change ■ Addition
8.2 Name	Layfield, Lisa A.
8.3 Street Address	1050 Thomas Jefferson St., N.W.
8.4 City-ST-ZIP	Washington, D.C. 20007
9.1 Title	V ☐ Change ■ Addition
9.2 Name	Oard, Verona L.
9.3 Street Address	1050 Thomas Jefferson St., N.W.
9.4 City-ST-ZIP	Washington, D.C. 20007
10.1 Title	V ☐ Change ■ Addition
10.2 Name	Sheridan, Linda R.
10.3 Street Address	1050 Thomas Jefferson St., N.W.
10.4 City-ST-ZIP	Washington, D.C. 20007