## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F96000001937

Entity Name: TOCCOA FALLS COLLEGE, INC.

FILED Jan 15, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4050 COLONIAL BLVD FT. MYERS, FL 33906

Current Mailing Address: New Mailing Address:

PO BOX 61721

FT. MYERS, FL 339061721

FEI Number: 58-0685908 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

JOR SOOGGINS SCOGGINS, JOE MR
1634 CHESHIRE CIRCLE N. 1634 CHESHIRE CIRCLE N.
LEHIGH ACRES, FL 33936 LEHIGH ACRES, FL 33936

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: JOE SCOGGINS 01/15/2004

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P () Delete
 Title:
 P (X) Change () Addition

 Name:
 YOUNG, DONALD DR.
 Name:
 GARDNER, WAYNE DR.

 Address:
 328 CHAPEL DRIVE.
 Address:
 328 CHAPEL DRIVE.

Address: 328 CHAPEL DRIVE. Address: 328 CHAPEL DRIVE.

City-St-Zip: TOCCOA FALLS, GA 30598 City-St-Zip: TOCCOA FALLS, GA 30598

Title: V ( ) Delete Title: GM (X) Change ( ) Addition Name: GARDNER, WAYNE Name: CORNELIUS, DAVID MR

 Address:
 1007 OAK CLIFF DR
 Address:
 328 CHAPEL DRIVE

 City-St-Zip:
 TOCCOA, GA 30577
 City-St-Zip:
 TOCCOA FALLS, GA 30598

Title: T ( ) Delete Title: T (X) Change ( ) Addition
Name: WILLARD, P.S Name: WILLARD, PAUL MR

 Name:
 WILLARD, P.S
 Name:
 WILLARD, PAUL
 MR

 Address:
 411 BEND N. HOCKORY RD.
 Address:
 411 BEND N. HOCKORY RD.

 City-St-Zip:
 TOCCOA, GA 30577
 City-St-Zip:
 TOCCOA, GA 30577

Title: DC ( ) Delete Title: DC (X) Change ( ) Addition

 Name:
 FERRELL, SAMUEL
 Name:
 FERRELL, SAMUEL DR

 Address:
 2504 ESTEY AVE.
 Address:
 2504 ESTEY AVE.

 City-St-Zip:
 NAPLES, FL 339424301
 City-St-Zip:
 NAPLES, FL 33942

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: WAYNE GARDNER CEO 01/15/2004