

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

1999

DOCUMENT # F9700005691

SOUTH EDUCATION CORPORATION

Principal Place of Business
709 MALL BLVD.
SAVANNAH GA 31406

Mailing Address

709 MALL BLVD. SAVANNAH GA 31406

FILED Apr 13, 1999 8:00 am Secretary of State

04-13-1999 90107 036 ***150.00



					DO NOT WRITE IN	IMIS SPACE		
				3. Date Incorporated or Qualifed]	
					10/29/1997			1
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	\sqcup	Applied For	1
21		26			58-1506710		Not Applicable	-
Suite, Apt.	#; etc	Suite, Apt. #; etc.			5. Certifcate of Status Desired	T	5-Additional = Required	-
22		City & State						
City & State		City & State			6. Election Campaign Financing	•	0 May Be ed to Fees	
23	Country Zip		Country		Trust Fund Contribution		d to rees	1
Zip		h : -		У	8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☒No			1
24	9. Name and Address of Current		L		10. Name and Address of New Registered Agent			1
 .	5. Name and Address of Current	Registered Agent	8	1 Name	To. Hame and Hazarda of their Hagier		<u> </u>	1
FLANIGAN, JOHN F ESQ.			Ĺ					ļ
	N. FLAGLER DR., 9TH FL.		82 Street Add		ddress (P.O. Box Number is Not Acceptable)			
	ST PALM BEACH FL 33401		8	3			···	ĺ
***				Ĭ				
			8	4 City		F! 85 Z	ip Code	1
44 Disease	to the assuming of Soctions 507.0503	and 607 1609 Florida Statutes	the abo	vo named con	poration submits this statement for the purpo	se of changing	its registered	ĺ
office or r	registered agent, or both, in the State o	of Florida. Such change was auth	norized b	v the corporat	tion's board of directors. I hereby accept the	appointment as	registered	
agent. I a	m familiar with, and accept the obligation	ions of, Section 607.0505, Florid	a Statute	s.				
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable (NOTE Re	oistered An	ent signsture requir	red when reinstating) DA	TE		_
12.	OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS A		RS AND DIREC	ND DIRECTORS IN 12	
TITLE	CP	☐ DELETE	1,1 TITLE			Chang	ge Addition	7 -
NAME	SOUTH, JOHN T III		1.2 NAME					2
STREET ADDRESS	709 MALL BLVD.		1.3 STRE	ET ADDRESS :				6
CITY-ST-ZIP	SAVANNAH GA 31406		1.4 CITY-ST-ZIP					18
TITLE	CS	☐ DELETE	2.1 TITLE			☐ Chan	ge 🔲 Addition	٦ (
NAME	II		2.2 NAME					
STREET ADDRESS	709 MALL BLVD.		2.3 STRE	ET ADDRESS				
CITY-ST-ZIP			2.4 CITY	-ST-ZIP				
TITLE	AS	☐ DELETE 3.1 TI				☐ Chan	ge 🔲 Addition]
NAME	WATERS, DON L		3.2 NAME	<u> </u>				
STREET ADDRESS	709 MALL BLVD.		3.3 STRE	ET ADDRESS				{
CITY-ST-ZIP	SAVANNAH GA 31406		3.4. CITY	-ST-ZIP]
TITLE	☐ DELETE		4.1 TITLE			☐ Chan	ge 🔲 Addition	
NAME			4. 2 NAM	E				
STREET ADDRESS			4.3 STRE	ET ADDRESS				
CITY-ST-ZIP			4.4 CITY-ST-ZIP					1
TITLE	☐ DELETE		5.1 TITLE			Chan	ge 🔯 Addition	1
NAME			5.2 NAME	<u>:</u>				
STREET ADDRESS			5.3 STRE	ET ADDRESS				1
CITY-ST-ZIP			5.4 CITY-	ST-ZIP]
TITLE		☐ DELETE	6.1 TITLE		· · · · · · · · · · · · · · · · · · ·	☐ Chan	ge	
NAME			6.2 NAME	:				
STREET ADDRESS			6.3 STRE	ET ADDRESS				ĺ
CITY-ST-ZIP			6.4 CITY-	ST-ZIP			.,,	J

14. I hereby certify that the information supplied with this filing 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 fueland 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 trastee 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 autress, with all other like empowered.

SIGNATURE: