

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L95388

FILED
Apr 29, 2010
Secretary of State

Entity Name: THE COLLEGE LIVING EXPERIENCE, INC.

Current Principal Place of Business:

6555 NOVA DRIVE
SUITE 300
DAVIE, FL 33317 US

New Principal Place of Business:

1321 MURFREESBORO PIKE
SUITE 702
NASHVILLE, TN 37217 US

Current Mailing Address:

1321 MURFREESBORO PIKE
SUITE 702
NASHVILLE, TN 37217 US

New Mailing Address:

FEI Number: 65-0216678 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

NRAI SERVICES, INC
2731 EXECUTIVE PARK DRIVE
STE. 4
WESTON, FL 33331 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD
Name: CLAYPOOL, MARK K
Address: 1321 MURFREESBORO PIKE SUITE 702
City-St-Zip: NASHVILLE, TN 37217

Title: SD
Name: WHITFIELD, DONALD B
Address: 1321 MURFREESBORO PIKE SUITE 702
City-St-Zip: NASHVILLE, TN 37217

Title: V
Name: SKELTON, BRYAN
Address: 1321 MURFREESBORO RD SUITE 702
City-St-Zip: NASHVILLE, TN 37217

I hereby 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 all other like empowered.

SIGNATURE: DONALD B. WHITFIELD

SD

04/29/2010

Electronic Signature of Signing Officer or Director

Date