2004 NOT-FOR-PROFIT CORPORATION

Jan 30, 2004 8:00 am **ANNUAL REPORT Secretary of State** DOCUMENT # N03000000292 01-15-2004 90007 032 ****61.25 FLORIDIANS FOR AN AFFORDABLE COLLEGE EDUCATION, INC. Principal Place of Business Mailing Address 204 S MONROE ST 66400471 204 S MONROE ST TALLAHASSEE, FL 32301 TALLAHASSEE, FL 32301 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01282004 Chg-NP CR2E037 (10/03) City & State Applied For City & State 4. FEI Number 11-3672720 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BLANK, F. PHILIP ESQ Street Address (P.O. Box Number is Not Acceptable) 204 S MONROE ST TALLAHASSEE, FL 32301 City Zip Code FL 8. 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. I am familiar with, and accept the obligations of registered agent. 01-28-04 F. PHILIP BLANK SIGNATURE Signature, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be Make check payable to \Box Trust Fund Contribution. Florida Department of State Added to Fees Due by May 1, 2004 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE EX-OFFICIO DIRECTOR/P/S/T Delete TITLE Change ☐ Addition F. PHILIP BLANK NAMÉ NAME STREET ADDRESS 204 SOUTH MONROE STREET STREET ADDRESS CITY-ST-7IP TALLAHASSEE, FL 32301-1840 CITY-ST-ZIP EX-OFFICIO DIRECTOR TITLE TITLE ☐ Delete ☐ Change ☐ Addition STANLEY TATE NAME NAME 204 SOUTH MONROE STREET STREET ADDRESS STREET ADDRESS CITY-ST-7IP TALLAHASSEE, FL 32301-1840 CITY-ST-ZIP EX-OFFICIO DIRECTOR TITLE . ☐ Change . Addition ☐ Delete TITLE NAME DWAYNE OTTENSTROER NAME STREET ADDRESS 204 SOUTH MONROE STREET STREET ADDRESS TALLAHASSEE, FL 32301-1840 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLÉ ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

12. I hereby certify that the information indicated on this report or supplied the apparation or the reconstruction of the apparation or the reconstruction of the apparation dupplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information ental report is type age accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director trustee employed to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if of the corporation or the rece changed, or on an attachmen all other like empowered.

CITY-ST-ZIP

SIGNATURE:

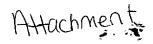
CITY-ST-ZIP

F. PHILIP BLANK SNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01-28-04

Daytime Phone # Date

FILED



2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

1/15/2004-90125-032-\$61.25-\$61.25

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DOCUMENT # N03000000292													
1. Entity Name FLORIDIANS FOR AN AFFORDABLE COLLEGE EDUCATION, INC.													
Principal Place of Business 204 S MONROE ST TALLAHASSEE, FL 32301			204	Mailing Address 204 S MONROE ST TALLAHASSEE, FL 32301				(def0411					
2. Principal Pla	ace of Busin	3. Mail	3. Mailing Address						na e e				
Suite, Apt. #, etc.			Su	Suite, Apt. #, etc.				01062004	Chg-NP	CR2E03	7 (10/03)		
City & State				City & State				4. FEI Number				plied For t Applicable	
Zip		Country	Zip		Cou	ntry			of Status Desired		\$8.75 Add Fee Require		
	6. Name	and Address of Current	Hegistera	d Agent		Name	<u>- · -</u>	7. Name and	Address of New F	legistered /	\gent		
BLANK, F. PHILIP ESQ 204 S'MONROE ST							Street Address (P.O. Box Number is Not Acceptable)						
TALLAHASSEE, FL 32301													
	٠	<u> </u>						FL Zip Code					
8. 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. Lam lamiliar with and accept the obligations of registered agent.													
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STREET ADDRESS CITY-ST-ZIP, 19				•		ET ADDRESS ST-ZIP						i	
12. 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 report or supplemental report is total 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 receive or that employers to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment of the corporation of the receiver of the corporation of the receiver of the corporation of the receiver of the employers. SIGNATURE: SIGNATURE: Date: Destination of the receiver of the information indicated on this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if the corporation of the receiver of the corporation of the receiver of the corporation of the receiver of the corporation of the corporation of the corporation of the receiver of the corporation of the corporation of the corporation of the receiver of the corporation of the corporation of the receiver of the corporation of the co													