## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000010426

Jan 15, 2008 Secretary of State

Entity Name: EDUCATION, PUBLIC POLICY AND CONSULTING GLOBAL MANAGEMENT FOUNDATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 1850 EXECUTIVE PARK DR CLEVELAND, TN 37312 **Current Mailing Address: New Mailing Address:** PO BOX 4938 CLEVELAND, TN 373204938 US FEI Number: 20-0437679 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: BOWMAN, JOHN C 864 MADÉRIA CIRCLE TALLAHASSEE, FL 32312 US 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete BOWMAN, JOHN C Name: Name: 1850 EXECUTIVE PARK DRIVE Address: Address: City-St-Zip: CLEVELAND, TN 37312 US City-St-Zip: Title: DP () Delete Title: () Change () Addition Name: ROLLIN, STEVE Name: Address: 864 MADERIA CIRCLE Address: City-St-Zip: TALLAHASSEE, FL 32312 US City-St-Zip: Title: () Delete Title: () Change () Addition BOWMAN, BETHANY Name: Name: Address: 4670 NAVAHO TRAIL Address: City-St-Zip: CLEVELAND, TN 37312 US City-St-Zip: Title: DST () Delete Title: () Change () Addition Name: LAWHORN, LINDA Name: 1850 EXECUTIVE PARK NW Address: Address: City-St-Zip: CLEVELAND, TN 37312 US City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: BETHANY BOWMAN DM 01/15/2008