2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 07, 2009
Secretary of State

DOCUMENT# N04000000296

Entity Name: ETHERIDGE-BEARD EDUCATION FOUNDATION INC.

Current Principal Place of Business:

5712 FINCH AVE
JACKSONVILLE, FL 32219

New Principal Place of Business:

5712 FINCH AVE.
JACKSONVILLE, FL 32219

Current Mailing Address:

POST OFFICE BOX 7011
NORTH AUGUSTA, SC 29861 US

New Mailing Address:

FEI Number: 03-0546356 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

O'BRYANT, ANGELINE B
5712 FINCH AVENUE
JACKSONVILLE, FL 32219 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

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: O'BRYANT, ANGELINE B
Address: 5712 FINCH AVENUE
City-St-Zip: JACKSONVILLE, FL 32219

Title: SD ( ) Delete
Name: MATTHEWS, BETTY R
Address: 3113 CHELSEA DRIVE
City-St-Zip: AUGUSTA, GA 30909

Title: D ( ) Delete
Name: SIMPKINS, ALMA B
Address: 1020 TODD AVENUE
City-St-Zip: NORTH AUGUSTA, SC 29841

Title: D ( ) Delete
Name: SMITH, CELESTINE
Address: 11768 CHERRY BARK DRIVE, EAST
City-St-Zip: JACKSONVILLE, FL 32218 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
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: ANGELINE B. O'BRYANT DIR. 05/07/2009
Electronic Signature of Signing Officer or Director — Date