2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 04, 2005
Secretary of State

DOCUMENT# N04000004737

Entity Name: SOLI DEO GLORIA ACADEMY OF TALLAHASSEE, INC.

Current Principal Place of Business:

537 E PARK AVE
TALLAHASSEE, FL 32301

New Principal Place of Business:

1983 MAHAN DRIVE
TALLAHASSEE, FL 32308

Current Mailing Address:

537 E PARK AVE
TALLAHASSEE, FL 32301

New Mailing Address:

1983 MAHAN DRIVE
TALLAHASSEE, FL 32308

FEI Number: 90-0172348 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HEALY, DAVID P
537 E PARK AVE
TALLAHASSEE, FL 32301 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: CP ( ) Delete
Name: YANG, DANIEL M.D.
Address: 1600 PHILLIPS RD
City-St-Zip: TALLAHASSEE, FL 32303

Title: VCV ( ) Delete
Name: BROOKS, LOGAN M.D.
Address: 3772 E MILLERS BRIDGE RD
City-St-Zip: TALLAHASSEE, FL 32312

Title: DST ( ) Delete
Name: HEALY, DAVID P
Address: 537 E PARK AVE
City-St-Zip: TALLAHASSEE, FL 32301

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:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DAVID P. HEALY ST 01/04/2005
Electronic Signature of Signing Officer or Director — Date