

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012378

FILED
Apr 25, 2008
Secretary of State

Entity Name: GOODWILL ACADEMY OF HIGHER LEARNING, INC.

Current Principal Place of Business:

300 MABRY ST.
TALLAHASSEE, FL 32304

New Principal Place of Business:

300 MABRY ST.
TALLAHASSEE, FL 32304 US

Current Mailing Address:

300 MABRY ST.
TALLAHASSEE, FL 32304

New Mailing Address:

300 MABRY ST.
TALLAHASSEE, FL 32304 US

FEI Number: 20-8693720

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHELPER, FRED G. JR.
300 MABRY ST.
TALLAHASSEE, FL 32304 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: C () Delete
Name: MCMULLIAN, ANDY D
Address: 300 MABRY STREET
City-St-Zip: TALLAHASSEE,, FL 32304

Title: V () Delete
Name: SCARBORO, JIM D
Address: 300 MABRY STREET
City-St-Zip: TALLAHASSEE, FL 32304

Title: T () Delete
Name: PARIS, FRANK D
Address: 300 MABRY STREET
City-St-Zip: TALLAHASSEE, FL 32304

Title: S () Delete
Name: OSTERYOUNG, JERRY D
Address: 300 MABRY STREET
City-St-Zip: TALLAHASSEE, FL 32304

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change () Addition
Name: SCARBORO, JIM
Address: 217 N. MONROE STREET
City-St-Zip: TALLAHASSEE,, FL 32301

Title: VC (X) Change () Addition
Name: OSTERYOUNG, JERRY DR
Address: 2912 BRANDEMERE DR
City-St-Zip: TALLAHASSEE, FL 32312

Title: TD (X) Change () Addition
Name: BLISS, GARY
Address: 75 WALKER CREEK DRIVE
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: P (X) Change () Addition
Name: SHELPER, FRED G JR
Address: 300 MABRY STREET
City-St-Zip: TALLAHASSEE, FL 32304

Title: SD () Change (X) Addition
Name: BRYANT, ELAINE
Address: 1882 CAPITAL CIRCLE NE SUITE 105
City-St-Zip: TALLAHASSEE, FL 32308

Title: D () Change (X) Addition
Name: MELTON, W. CALVIN DR
Address: 451 CEDAR HILL ROAD
City-St-Zip: TALLAHASSEE, FL 32312

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: FRED G. SHELPER, JR.

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04/25/2008

Electronic Signature of Signing Officer or Director

Date