

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N93000002478

**FILED**  
**Jan 26, 2004**  
**Secretary of State****Entity Name:** FINANCING CORPORATION FOR THE SCHOOL BOARD OF POLK COUNTY, FLORIDA**Current Principal Place of Business:**1915 S FLORAL AVE  
BARTOW, FL 33830**New Principal Place of Business:****Current Mailing Address:**POST OFFICE 391  
BARTOW, FL 33831 US**New Mailing Address:****FEI Number:** 59-3189243**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**THORNHILL, R. J.  
1915 SOUTH FLORAL AVENUE  
BARTOW, FL 33830 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:** O'REILLY, FRANK J  
**Address:** 1915 S FLORAL AVE  
**City-St-Zip:** BARTOW, FL 33830**Title:** D ( ) Delete  
**Name:** SELLERS, HAZEL  
**Address:** 1915 S FLORAL AVE  
**City-St-Zip:** BARTOW, FL 33830**Title:** D ( ) Delete  
**Name:** REDDOUT, BRENDA C  
**Address:** 1915 S FLORAL AVE  
**City-St-Zip:** BARTOW, FL 33830**Title:** D ( ) Delete  
**Name:** THORNHILL, R. J.  
**Address:** 1915 S FLORAL AVE  
**City-St-Zip:** BARTOW, FL 33830**Title:** D ( ) Delete  
**Name:** NELSON, JIM  
**Address:** 1915 S FLORAL AVE  
**City-St-Zip:** BARTOW, FL 33830**Title:** D ( ) Delete  
**Name:** ENGLISH, JACK  
**Address:** 1915 S FLORAL AVE  
**City-St-Zip:** BARTOW, FL 33830**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** D (X) Change ( ) Addition  
**Name:** O'REILLY, FRANK J  
**Address:** 1915 S FLORAL AVE  
**City-St-Zip:** BARTOW, FL 33830**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:****Title:** C (X) Change ( ) Addition  
**Name:** ENGLISH, C. J.  
**Address:** 1915 S FLORAL AVE  
**City-St-Zip:** BARTOW, FL 33830

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: C J ENGLISH

C

01/26/2004

Electronic Signature of Signing Officer or Director

Date