

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001165

FILED  
Apr 27, 2005  
Secretary of State

Entity Name: FIRST COAST TECHNICAL INSTITUTE, INC.

## Current Principal Place of Business:

2980 COLLINS AVE  
ST AUGUSTINE, FL 32095

## New Principal Place of Business:

## Current Mailing Address:

2980 COLLINS AVE  
ST AUGUSTINE, FL 32095

## New Mailing Address:

FEI Number: 59-1276697

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

COTHRON, CHRISTINE  
2980 COLLINS AVE  
ST AUGUSTINE, FL 32095 US

## Name and Address of New Registered Agent:

COTHRON, CHRISTINE  
2980 COLLINS AVE  
ST AUGUSTINE, FL 32095 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: CHRISTINE COTHRON

04/27/2005

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: BEXLEY, MR. JERRY  
Address: 1700 DOBBS ROAD  
City-St-Zip: SAINT AUGUSTINE, FL 320865223

Title: P ( ) Delete  
Name: COTHRON, CHRISITNE  
Address: 2980 COLLINS AVE  
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: D ( ) Delete  
Name: O'CONNER, MS. MARLENE  
Address: 21 WORLD GOLF FOUNDATION  
City-St-Zip: SAINT AUGUSTINE, FL 32092

Title: DC ( ) Delete  
Name: ROYAL, VAN  
Address: 3616 MAGNOLIA POINT BLVD.  
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: D ( ) Delete  
Name: WHITE, MRS. PEGGY  
Address: 1975 LAKESHORE DRIVE NORTH  
City-St-Zip: ORANGE PARK, FL 32003

Title: D ( ) Delete  
Name: LARSON, MR. WES  
Address: PO BOX 550  
City-St-Zip: PALATKA, FL 320780550

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DC (X) Change ( ) Addition  
Name: PILGRIM, JR., MR. FRED H.  
Address: P.O. BOX 919  
City-St-Zip: PALATKA, FL 321780919

Title: P (X) Change ( ) Addition  
Name: COTHRON, CHRISTINE  
Address: 2980 COLLINS AVE  
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: D (X) Change ( ) Addition  
Name: BEXLEY, MR. ROBERT  
Address: 1700 DOBBS ROAD  
City-St-Zip: SAINT AUGUSTINE, FL 32086

Title: D (X) Change ( ) Addition  
Name: BURCHFIELD, MRS. ROBIN  
Address: 1 RIBERIA STREET  
City-St-Zip: ST. AUGUSTINE, FL 32084

Title: D (X) Change ( ) Addition  
Name: LARSON, MR. WES  
Address: P. O. BOX 550  
City-St-Zip: PALATKA, FL 32078

Title: D (X) Change ( ) Addition  
Name: KILBERG, MS. KELLIE JO  
Address: 1734 KINGSLEY AVENUE  
City-St-Zip: ORANGE PARK, FL 32073

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: CHRISTINE COTHRON

P

04/27/2005

Electronic Signature of Signing Officer or Director

Date