,2002 UNIFORM BUSINESS REPORT (UBR)

FILED Apr 22, 2002 8:00 am Secretary of State P00000083930 DOCUMENT # NATIONAL EDUCATION LOAN NETWORK OF FLORIDA, NO. 04-22-2002 90141 011 ***158.75 Mailing Address Principal Place of Business 6420 SOUTHPOINT PKWY 6420 SOUTHPOINT PKWY JACKSONVILLE FL 32216 JACKSONVILLE FL 32216 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State NOT APPLICABLE Not Applicable \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent ^{Name} Edward P. <u>Martinez c/o Human Resources</u> HENRY, BARRY K Street Address (P.O. Box Number is Not Acceptable) 6420 Southpoint Parkway 6420 SOUTHPOINT PKWY JACKSONVILLE FL 32216 Zip Code 32216 ^{City} Jacksonville, ne pu**rf**ose of changing its registered office or registered agent, or both, in the State of Florida. 8. The above named entity submits this statement in 4/12/02 (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Added to Fees Trust Fund Contribution. (See criteria on back) П Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Change Change Director - D **▼** Delete TITLE TITLE Terry Heimes HOSEA, CHARLES E MAME NAME 121 South 13th Street, #301 6420 SOUTHPOINT PKWY STREET ADDRESS STREET ADDRESS Lincoln, NE 68508 JACKSONVILLE FL 32216 CITY-ST-7IP CITY-ST-7IP Officer - O ☐ Delete TITLE TITLE Michael S. Dunlap NAME NAME 6801 South 27th Street STREET ADDRESS STREET ADDRESS Lincoln, NE 68512 CITY-ST-ZIP CITY-ST-ZIP Change Officer - 0 Addition ☐ Delete TITLE TITLE Edward P. Martinez NAME NAME 6420 Southpoint Parkway STREET ADDRESS STREET ADDRESS Jacksonville, FL CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Delete TITLE Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS

13. I hereby certify that the information supplied with this filing does not qualify 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 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with attorner like empowered.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-7IP

Date

Daytime Phone #

ATTACH DOC# POODOOD 83930/635290

April 15, 2002

Department of State Division of Corporations Uniform Business Report Filings 409 East Gaines Street Tallahassee, FL 32399

Re: Nelnet Education Loan Network of Florida, Inc.

Dear Division of Corporations:

Leggy Limch

Enclosed is a completed and executed 2002 Uniform Business Report along with check # 093704 in the amount of \$158.75 to cover the cost of the filing and the Certificate of Status. Please send the Certificate of Status to my attention at the above address. Feel free to contact me at your convenience if I may be of any further assistance in this matter.

Sincerely,

Peggy Lynch Legal Assistant

Enclosures (2)

By UPS Next Day Air, Airbill # 5674 8538