

# 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000054673

Entity Name: STUDENT LOAN AUTHORITY INC

FILED  
Oct 18, 2005  
Secretary of State

**Current Principal Place of Business:**

P.O. BOX 86715  
MADEIRA BEACH, FL 33738

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 86715  
MADEIRA BEACH, FL 33738

**New Mailing Address:**

FEI Number: 32-0076914

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WILSON, LORENZO  
6262 142ND AVE NORTH  
704  
CLEARWATER, FL 33760 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: LORENZO WILSON

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PRES ( ) Delete  
Name: WILSON, LORENZO  
Address: 6262 142ND AVE NORTH  
City-St-Zip: CLEARWATER, FL 33760

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LORENZO WILSON

Electronic Signature of Signing Officer or Director

PRE

10/18/2005

Date