


FILED
Apr 27, 2005 8:00 am
Secretary of State

DOCUMENT # P04000094436		
1. Entity Name COLLEGE SHOP, INC.		
Principal Place of Business 8911 DANIELS PARKWAY SUITE 4 FORT MYERS, FL 33912		Mailing Address 8911 DANIELS PARKWAY SUITE 4 FORT MYERS, FL 33912
2. Principal Place of Business 8911 DANIELS PKWY Suite, Apt. #, etc. #4 City & State FORT MYERS FL Zip 33912		3. Mailing Address 8911 DANIELS PKWY Suite, Apt. #, etc. #4 City & State FORT MYERS FL Zip 33912
Country US		Country US
6. Name and Address of Current Registered Agent		
TANNER, DEBORAH L 5319 PELICAN BLVD. CAPE CORAL, FL 33914		Name N/A Street Address City
8. The above named entity submits this statement for the purpose of changing its registered office or registering the obligations of registered agent.		
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required)</small>		
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5 Ad
10. OFFICERS AND DIRECTORS		
TITLE	PD <input type="checkbox"/> Delete TANNER, DEBORAH L 5319 PELICAN BLVD. CAPE CORAL, FL 33914	TITLE NAME STREET ADDRESS CITY - ST - ZIP
TITLE	VD <input type="checkbox"/> Delete WHITED, LINDA I 2224 HAMPSTEAD CT. LEHIGH ACRES, FL 33971	TITLE NAME STREET ADDRESS CITY - ST - ZIP
TITLE	SD <input type="checkbox"/> Delete TANNER, ALLEN D III 5319 PELICAN BLVD. CAPE CORAL, FL 33914	TITLE NAME STREET ADDRESS CITY - ST - ZIP
TITLE	TD <input type="checkbox"/> Delete WHITED, RUSS 2224 HAMPSTEAD CT LEHIGH ACRES, FL 33971	TITLE NAME STREET ADDRESS CITY - ST - ZIP
TITLE	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP
TITLE	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in S indicated on this report or supplemental report is true and accurate and that my signature shall have the of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 60 changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: Deborah L. Tanner <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		