2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000142704

Entity Name: STRONG COLLEGE STUDENTS INCORPORATED

FILED Sep 09, 2005 Secretary of State

| Current Pr | incipal Pla | ce of Business: | New Principal Place of | New Principal Place of Business: | |
|---|--|--|---|--|--|
| USF 30439 TAMPA, FL | | | | | |
| Current Ma | ailing Add | ress: | New Mailing Address: | New Mailing Address: | |
| USF 30439 TAMPA, FL | | | 4202 E. FOWLER AVE. USF 30439 TAMPA, FL 33620 | | |
| FEI Number: | 35-2239472 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: Name and Address of New Registered Agent: | | | | | |
| BEDELL, S 8422 SEA I TAMPA, FL | HARBOR IN | I US | | | |
| The above in the State | | ty submits this statement for the pur | pose of changing its registered | office or registered agent, or both, | |
| SIGNATUR | RE: | | | | |
| | Elect | onic Signature of Registered Agent | | Date | |
| | | .193(2)(b), F.S., the corporation did not r sing Trust Fund Contribution (). | eceive the prior notice. | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANGES | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | PT BEDELL, SO USF 30439 TAMPA, FL | | Title: (Name: Address: City-St-Zip: |) Change () Addition | |
| Title: Name: Address: City-St-Zip: | CEOV ROBINSON, USF 30439 TAMPA, FL | | Title: (Name: Address: City-St-Zip: |) Change () Addition | |
| Title: Name: Address: City-St-Zip: | COOS PEAVY, COI USF 30439 TAMPA, FL | | Title: (Name: Address: City-St-Zip: |) Change () Addition | |

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: SHAUN C. ROBINSON CEO 09/09/2005