

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 14, 2007 8:00 am
Secretary of State

08-14-2007 90007 028 ***158.75

DOCUMENT # P06000064084			
1. Entity Name THE COLLEGE CORNER, INC.			
Principal Place of Business 2201 BLAKELY AVE. PENSACOLA, FL 32507		Mailing Address 2201 BLAKELY AVE. PENSACOLA, FL 32507	
2. Principal Place of Business - No P.O. Box # <i>86 Brent Lane</i>		3. Mailing Address <i>201 St. Eusebia St.</i>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State <i>Pensacola, FL</i>		City & State <i>Pensacola, FL</i>	
Zip <i>32503</i>		Zip <i>32503</i>	
Country <i>USA</i>		Country <i>USA</i>	
4. FEI Number 08092007		Chg-P CR2E034 (12/06)	
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required		Applied For <input checked="" type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145		7. Name and Address of New Registered Agent Name <i>No change</i> Street Address (P.O. Box Number is Not Acceptable) City <i>FL</i> Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT NADOLNY, WILLIAM 2201 BLAKELY AVE. PENSACOLA, FL 32507 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>Pr</i> <i>Nadorny, William</i> <i>201 St. Eusebia St.</i> <i>Pensacola, FL 32503</i> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD NADOLNY, HEIDI 2201 BLAKELY AVE. PENSACOLA, FL 32507 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>VSD</i> <i>Nadorny, Heidi</i> <i>201 St. Eusebia St.</i> <i>Pensacola, FL 32503</i> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other the empowered.			
SIGNATURE: <i>William Nadolny</i>		Date: <i>8-9-07</i> Daytime Phone #: <i>8502321997</i>	