2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 11, 2004
Secretary of State

DOCUMENT# P93000077002

Entity Name: STUDENT FUNDING CORPORATION OF AMERICA, INC.

Current Principal Place of Business:

P.O. BOX 5148
WINTER PARK, FL 327925148

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 5148
WINTER PARK, FL 327925148

New Mailing Address:

FEI Number: 59-3214212 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

HADDOCK PROFESSIONAL ASSOCIATION
3300 UNIVERSITY BLVD
SUITE 160
WINTER PARK, FL 32792 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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	PSD	( ) Delete
Name:	HADDOCK, EDWARD E JR.	
Address:	3300 UNIVERSITY BLVD SUITE 160	
City-St-Zip:	WINTER PARK, FL 32789	
Title:	PSD	( ) Delete
Name:	PHELPS, JONATHAN D	
Address:	3300 UNIVERSITY BLVD SUITE 160	
City-St-Zip:	WINTER PARK, FL 32789	
Title:	PSD	( ) Delete
Name:	HEAVENER, JAMES W.	
Address:	3300 UNIVERSITY BOULEVARD, STE 160	
City-St-Zip:	WINTER PARK, FL 32789	
Title:	AS	( ) Delete
Name:	GEOFF ROGERS,	
Address:	3300 UNIVERSITY BOULEVARD STE 160	
City-St-Zip:	WINTER PARK, F 32789	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: GEOFF ROGERS AS 02/11/2004

Electronic Signature of Signing Officer or Director — Date