FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Feb 13, 2001 8:00 am DOCUMENT # F9800002173 **Secretary of State** 1. Entity Name 02-13-2001 90591 016 ****61.25 THE LEARNING INITIATIVE INCORPORATED Principal Place of Business Mailing Address 316 WEST 12TH STREET 316 WEST 12TH STREET DUUTEARD AUSTIN TX 78701-1840 AUSTIN TX 78701-1840 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 74-2859814 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) GLEDICH, NICHOLAS DR. 1003 FEATHERSTONE CIR. OCOEE FL 34761-3411 Zip Code FL 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) **FILE NOW:** 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. TITLE Delete Change Addition TITLE HOLTZMAN, WAYNE H PH.D NAME NAME STREET ADDRESS 316 WEST 12TH STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP AUSTIN TX 78701-1840 TITI F ☐ Delete ☐ Change Addition NAME GLEDICH, NORA F NAME STREET ADDRESS 1003 FEATHERSTONE CIR. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP OCOEE FL 34761-3411 TITLE ☐ Delete TITLE ☐ Change ☐ Addition WISNESKI, WILLIAM J STREET ADDRESS 786 STRAWBERRY HILL ROAD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CONCORD MA 01742 TITLE ☐ Defete TITLE Change Addition WILLIAMSON, THOMAS A NAME NAME 5 CHEVERLY COURT STREET ADDRESS 3400 MT. BONNELL ROAD STREET ADDRESS 78738- 15 11 CITY-ST-ZIP AUSTIN TX CITY-ST-ZIP AUSTIN TX 78731-5850 TITLE □ Delete TITLE Addition WILLIAMSON, KATHRYN W NAME MARAE COURT 5 CHEVERLY STREET ADDRESS STREET ADDRESS 3400 MT. BONNELL ROAD 76738-1511 CITY-ST-ZIP CITY-ST-ZIP STINFILUA AUSTIN TX 78731-5850 TITLE □ Delete TITLE ☐ Addition NAME SMITH, ANGELA NAME STREET ADDRESS 9209 SIMMONS ROAD STREET ADDRESS City-St-7iP **AUSTIN TX 78759** CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 617, 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 like empowered.

SIGNATURE:

HOWER BOMP A. WILLAMION SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

512-708 -9369