

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N02000006074

FILED
Sep 10, 2003
Secretary of State

Entity Name: FLORIDA NOW EDUCATION FUND INCORPORATED

Current Principal Place of Business:

21105 SE 144TH LANE
UMATILLA, FL 32784 US

New Principal Place of Business:

Current Mailing Address:

21105 SE 144TH LANE
UMATILLA, FL 32784 US

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SLUTIAK, DONNA M
21105 SE 144TH LANE
UMATILLA, FL 32784 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

OFFICERS AND DIRECTORS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Change (X) Addition
Name: KELLY, KATHERINE
Address: 160 ROYAL PALM WAY
City-St-Zip: PALM BEACH, FL 33480 US

Title: D () Change (X) Addition
Name: ANDRE, NATALIE
Address: 14782 WOOD LODGE LANE
City-St-Zip: DELRAY BEACH, FL 33484 US

Title: T () Change (X) Addition
Name: SLUTIAK, DONNA M
Address: 21105 SE 144TH LANE
City-St-Zip: UMATILLA, FL 32784 US

Title: P () Change (X) Addition
Name: MIKLOWITZ, LINDA
Address: 2542 ARTHUR'S COURT
City-St-Zip: TALLAHASSEE, FL 32301 US

Title: V () Change (X) Addition
Name: BROWNE, KIMBERLY
Address: 3002 NW 51ST ST. DRIVE
City-St-Zip: GAINESVILLE, FL 32606 US

Title: S () Change (X) Addition
Name: WALL, HELEN
Address: 6066 113 AVE N
City-St-Zip: PINELLAS PARK, FL 33782 US

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DONNA M SLUTIAK

T

09/10/2003

Electronic Signature of Signing Officer or Director

Date