

2001 UNIFORM BUSINESS REPORT (UBR)

2/

FILED
Mar 02, 2001 8:00 am
Secretary of State

02-01-2001 90093 009 ****61.25

DOCUMENT # N92000000425

1. Entity Name

SUNSHINE STATE TEACHERS OF ENGLISH TO SPEAKERS O

Principal Place of Business

Mailing Address

630 S. ORANGE AVE
SUITE 103
SARASOTA FL 34236

630 S. ORANGE AVE
SUITE 103
SARASOTA FL 34236

2. Principal Place of Business

8231 Nice Way

3. Mailing Address

8231 Nice Way

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

SARASOTA FL

City & State

SARASOTA FL

4. FEI Number

59-1846978

Applied For

Not Applicable

Zip

Country

Zip

Country

34238

U.S.A.

34238

USA

5. Certificate of Status Desired

\$8.75 Additional

Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

Alene G. Grognet

Street Address (P.O. Box Number is Not Acceptable)

8231 Nice Way

SARASOTA

City

FL

Zip Code

34238

GROGNET, ALENE
630 S. ORANGE AVE
SUITE 103
SARASOTA FL 34236

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

Alene G. Grognet

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

Jan. 22, 2001

DATE

**FILE NOW:
FEE IS \$61.25**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

TITLE	VDII	☐ Delete
NAME	MORGAN, SANDRA	
STREET ADDRESS	24 GARDEN MALL COURT	
CITY-ST-ZIP	INGLIS FL 34449	
TITLE	PD	☐ Delete
NAME	KRAFT, MICHAEL	
STREET ADDRESS	1799 SE 17TH ST.	
CITY-ST-ZIP	FT LAUDERDALE FL 33316	
TITLE	VD-I	☐ Delete
NAME	SANTOS, MARILYN	
STREET ADDRESS	519 RIVERWOOD CIRCLE	
CITY-ST-ZIP	ORLANDO FL 32825	
TITLE	TD	☐ Delete
NAME	GROGNET, ALENE	
STREET ADDRESS	630 S. ORANGE AVE., SUITE 103	
CITY-ST-ZIP	SARASOTA FL 34236	
TITLE	SD	☐ Delete
NAME	DUNLOP, KATHERINE	
STREET ADDRESS	1701 PRUDENTIAL DR	
CITY-ST-ZIP	JACKSONVILLE FL 32207	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PRESIDENT	☒ Change ☐ Addition
NAME	SANDRA MORGAN D	
STREET ADDRESS	24 Garden Mall Court	
CITY-ST-ZIP	INGLIS, FL 34449	
TITLE	1st VP	☒ Change ☐ Addition
NAME	Katherine Dunlop D	
STREET ADDRESS	1701 Prudential Dr.	
CITY-ST-ZIP	Jacksonville, FL	
TITLE	2nd VP	☒ Change ☐ Addition
NAME	Betty Green D	
STREET ADDRESS	771 W. River Oak Dr.	
CITY-ST-ZIP	Ormond Beach, FL 32174	
TITLE	Secretary	☒ Change ☐ Addition
NAME	Maria Thayer D	
STREET ADDRESS	1323 Piper Blvd.	
CITY-ST-ZIP	Naples, FL 34110	
TITLE	Treasurer	☒ Change ☐ Addition
NAME	Alene Grognet D	
STREET ADDRESS	8231 Nice Way	
CITY-ST-ZIP	SARASOTA, FL 34238	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(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:

Alene G. Grognet

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan. 22, 2001

DATE

941-925-4248

Daytime Phone #

CR2E037 (10/00)