2002 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 21, 2002 8:00 am DOCUMENT # N9200000425 Secretary of State 1. Entity Name SUNSHINE STATE TEACHERS OF ENGLISH TO SPEAKERS O 02-21-2002 90007 038 ****61 F OTHER LANGUAGES (TESOL) OF FLORIDA, INC. Principal Place of Business Mailing Address 8231 NICE WAY 8231 NICE WAY SARASOTA FL 34238 SARASOTA FL 34238 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-1846978 Not Applicable Country 7in Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name GROGNET, ALLENE Street Address (P.O. Box Number is Not Acceptable) 8231 NICE WAY SARASOTA FL 34238 City 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. (ALLENE GROGNET) 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. (9/01) ☑ Delete TITLE TITLE Change Maddition MORGAN, SANDRA ME) NAME Dunlof, Kather 24 GARDEN MALL COURT STREET ADDRESS STREET ADDRESS INGLIS FL 34449 CITY-ST-ZiP CITY-ST-ZIP F1. 32256 1VPD Delete Change ☐ Addition TITLE TITLE DUNLOP, KATHERINE NAME NAME 71 River Odk Drive 1701 PRESIDENTIAL DRIVE STREET ADDRESS STREET ADDRESS JACKSONVILLE FL CITY-ST-ZIP CITY-ST-ZIP Ormand Beach 2VPD ☑ Delete Benz, Chuyl 918 N.E. 84th Street ☐ Addition TITLE TITLE Change GREEN, BETTY NAME NAME 771 W RIVER OAK DRIVE STREET ADDRESS STREET ADDRESS **ORMOND BEACH FL 32174** CITY-ST-ZIP CITY-ST-ZIP Miami, Fl TD Delete Change ☐ Addition TITLE TITLE GROGNET, ALLENE Grognet, Allene 8231 Nice Way NAME NAME 630 S. ORANGE AVE., SUITE 103 STREET ADDRESS STREET ADDRESS SARASOTA FL 34236 CITY-ST-ZIP CITY-ST-ZIP SD Delete TITLE ☐ Addition evine, Linda New TORRES, MARIA NAME NAME 361 Marbrisa Drive 1323 PIPER BLVD. STREET ADDRESS STREET ADDRESS NAPLES FL 34110 CITY-ST-ZIP CITY-ST-ZIP 32963 Change ☐ Addition TITI F ☐ Delete TITLE NAME NAME

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.

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-7(P