

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 20, 2000 8:00 am
Secretary of State

03-20-2000 90134 042 ****61.25

DOCUMENT # N97000006302

1. Entity Name

PUBLIC INTEREST LOAN REPAYMENT ASSISTANCE PROGRA

Principal Place of Business

Mailing Address

P.O. BOX 530134
 ST. PETERSBURG FL 33747

P.O. BOX 530134
 ST. PETERSBURG FL 33747-0134

2. Principal Place of Business

P.O. Box 20475

3. Mailing Address

P.O. Box 20475

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

St. Petersburg, FL

City & State

St. Petersburg, FL

4. FEI Number

59-3475750

Applied For

Not Applicable

Zip

33742-0475

Country

USA

Zip

33742-0475

Country

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

GERSHON, I. RICHARD
 1401 61ST STREET SOUTH
 STETSON UNIVERSITY COLLEGE OF LAW
 ST. PETERSBURG FL 33707-3299

Name Stacey Klein Verde

Street Address (P.O. Box Number is Not Acceptable)
442 W. Kennedy Blvd

Suite 300

City Tampa

FL

Zip Code 33606

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 Stacey Klein Verde

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

(NOTE: Registered Agent signature required when reinstating)

3/15/00

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE Delete
 NAME **D KLEIN, STACEY**
 STREET ADDRESS **2024 BLUE HAWK CT. #1823**
 CITY-ST-ZIP **CLEARWATER FL 34622**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **D BAUMANN, WILLIAM**
 STREET ADDRESS **13596 FEATHER SOUND CIR. W. APT. #2110**
 CITY-ST-ZIP **CLEARWATER FL 33762**

TITLE Change Addition
 NAME William Baumann
 STREET ADDRESS 4642 Dunnie Dr
 CITY-ST-ZIP Tampa, FL 33614

TITLE Delete
 NAME **D BLANTON, CAMILLE**
 STREET ADDRESS **100 EDGEWATER DR. #234**
 CITY-ST-ZIP **CORAL GABLES FL 33133**

TITLE Change Addition
 NAME Karen Daering
 STREET ADDRESS 1506 86th Avenue N.
 CITY-ST-ZIP St. Petersburg, FL 33702

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME Andrew Adler
 STREET ADDRESS 1522 Firewheel Dr
 CITY-ST-ZIP Wesley Chapel, FL 33543

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 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: Stacey Klein Verde Stacey Klein Verde 3/15/00 (813) 253-2010
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)