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NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N9800003423

A GIFT FOR TEACHING, INC.

Princ	ipal	Place	of	Business

Mailing Address

<5401_KIRKMAN_RD: 3TE 300 ORLANDO-FL 32819

.5401_KIRKMAN_RD: STE 300 ORLANDO FL 92819

FILED May 05, 1999 8:00 am Secretary of State

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Suite, Apt. #, etc. Suite, Ap	Sulta, Apt. #, etc. Sulta, Apt. #, etc.	2. Principal F	Place of Business	2a. Mailing Address		Date Incorporated or Qualifed	
Suite, Apt. R., etc. Suite, Apt. R., etc.	Sulfa, Apt. F. etc.			26 2814 CORRIN	IE BR.	06/12/1998	
City & State City	Section Status						Applied For
City & Slate 28 ORLANDO FL 28 ORLANDO FL 28 ORLANDO FL 29 Country 21 ORLANDO FL 29 ORLANDO FL 20 ORLANDO FL 28 ORLANDO FL	City S State 29	22		27		59-35/5/62	Not Applicable
Zip	Zip	City & Sta		City & State	FL	5. Certifcate of Status Desired	•
23 32 33 35 35 35 35 35	24 32803 [25 M5 28] 37803 [30 M5 Trust Fund Contribution Added to Fees 9. Name and Address of Current Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 84 City RUMAND Pt. 32619 11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Fordad Statutes, the above-named corporation submits this statement for the purpose of changing its registered diffice or registered agent, or both, in the State of Florids, Such change was authorized by the corporation submits this statement for the purpose of changing its registered diffice or registered agent, and analysis of provide area of the acceptable of the purpose of changing its registered agent, and analysis of provide area of the acceptable of the purpose of changing its registered diffice or registered agent, and analysis of provide acceptable of provides and the acc	23 UN CA	Country	7in	Country	6 Election Campaign Financing	\$5.00 May Be
9. Name and Address of Current Registered Agent LANDWIRTH, GARY -549+ KIRKMAN RD, STE 300ORLANDO RL 32919- 11. Pursuant to the provisions of Sections 617.0502 and 617.1508. Florida Statutes. 14. Pursuant to the provisions of Sections 617.0502 and 617.1508. Florida Statutes. 15. Pursuant to the provisions of Sections 617.0502 and 617.1508. Florida Statutes. 16. Pursuant to the provisions of Sections 617.0502 and 617.1508. Florida Statutes. 17. Pursuant to the provisions of Sections 617.0502 and 617.1508. Florida Statutes. 18. City RUMD 19. Carrier of Sections 617.0502 and 617.1508. Florida Statutes. 19. Carrier of Sections 617.0502 and 617.1508. Florida Statutes. 19. Carrier of Sections 617.0502 and 617.1508. Florida Statutes. 19. Carrier of Sections 617.0502 and 617.1508. Florida Statutes. 19. Carrier of Sections 617.0502 and 617.1508. Florida Statutes. 19. Carrier of Sections 617.0502 and 617.1508. Florida Statutes. 19. Carrier of Sections 617.0502 and 617.1508. Florida Statutes. 19. Carrier of Sections 617.0502 and 617.1508. Florida Statutes. 19. Carrier of Sections 617.0502 and 617.1508. Florida Statutes. 19. Carrier of Sections 617.0502 and 617.1508. Florida Statutes. 19. Carrier of Sections 617.0502 and 617.1508. Florida Statutes. 19. Carrier of Sections 617.0502 and 617.1508. Florida Statutes. 19. Carrier of Sections 617.0502 and 617.1508. Florida Statutes. 19. Carrier of Sections 617.0502 and 617.1508. Florida Statutes. 19. Carrier of Sections 617.0502 and 617.1508. Florida Statutes. 19. Carrier of Sections 617.0502 and 617.1508. Florida Statutes. 19. Carrier of Sections 617.0502 and 617.1508. Florida Statutes. 19. Carrier of Sections 617.0502 and 617.1508. Florida Statutes. 19. Carrier of Sections 617.0502 and 617.1508. Florida Statutes. 19. Carrier of Sections 617.0502 and 617.1508. Florida Statutes. 19. Carrier of Sections 617.0502 and 617.1508. Florida Statutes. 19. Carrier of Sections 617.0502 and 617.1508. Florida Statutes. 19. Carrier of Sections 617.0502 and 617.1	9. Name and Address of Current Registered Agent LANDWIRTH, GARY					' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	·
LANDWIRTH, GARY	LANDWIRTH, GARY	24 300		<u> </u>	<u> </u>		ered Agent
-5401 KIRKMAN RD, STE 300ORLANDO FL 32919 11. Pursuant to the provisions of Sections 617 0502 and 617 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered directors. I hereby accept the appointment as registered agent, or both, in the State of Florida Statutes. Intel D	### STREET ADDRESS OFF. ST.2P TITLE D CAMPBELL, SCOTT STREET ADDRESS OFF. S.200 TITLE D CHEFTS, DOUG STREET ADDRESS OFF. S.200 STREET ADDR		3. Name and Address of Ourient	- Mediatorea Marie	81 Name		
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SI Pursuant to the provisions of Sections \$17,0502 and \$17,1508. Florida Statutes, the above-named corporation submits this statement for the purpose purpose agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors, I hereby accorption the appointment as registered agent, I am familiar with, and accept the objections of, Section \$17,0503. Florida Statutes, the above-named corporation's board of directors, I hereby accorption the appointment as registered agent, I am familiar with, and accept the objections of, Section \$17,0503. Florida Statutes, the above-named corporation's board of directors, I hereby accorption the appointment as registered agent, I am familiar with, and accept the objections of, Section \$17,0503. Florida Statutes, the above-named corporation submits this statement for the purpose the appointment as registered of the purpose of the pu	ORLANDO FL 32819 84 CITY ORLANDO FL 85 Z2COS 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florids, Such change was authorated by the corporation's board of directors. I hereby accopt the appointment as registered agent, and familiar with, and accept the obligations of, Section 617.0503, Florida Statutes, agent, and familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE				82 Street Add	ress (P.O. Box Number is Not Acceptable)	
Pitrasuant to the provisions of Sections 817,0502 and 617,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered office or registered agent, and properly the objections of, Section 617,0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent, and accept the objectives. Signature State	STREET ADDRESS SOUTH RD STREET ADDRESS SUFFER DORESS				83 22/4	CURRING UK.	
11. Pursuant to the provisions of Sections 617 0502 and 617 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered signer, it am familiar vitin, and adaptit the subjections of Section 617 0503, Florida Statutes. SIGNATURE Suparant, iffed or primed time of registered agents, without the suppose of	11. Pursuant to the provisions of Sections 617 0502 and 617 1509. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent; or both in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered office or registered agent, and accept the obligations of Section 617 0503. Florida Statutes, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered office or registered agent and title if applicates. (NOTE: Registered Agent synthus required when reinstating) SIGNATURE Suprature Reflect or printed name of ingestered igner and title if applicates. (NOTE: Registered Agent synthus required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE D. ALLEN, SUE STREET ADDRESS 6501 MAGIC WY 1.2 STREET ADDRESS 1.3 STREET ADDRESS 1.4 CITY-ST-2P ORLANDO FL. 32819 1.4 CITY-ST-2P TITLE D. Change Addition NAME CIFERS, DOUG STREET ADDRESS 243S DUFF RD 1.3 STREET ADDRESS 243S DUFF RD 1.4 CITY-ST-2P TITLE D. Change Addition ACCIFFERS, DOUG STREET ADDRESS 1.3 STREET ADDRESS 1.4 CITY-ST-2P TITLE D. Change Addition ACCIFF-ST-2P TITLE D. Change Ad	-ORLAND	3 FL 32819 -				<u></u>
11. Pursuant to the provisions of Sections 617 0502 and 617 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorican's board of directors. I hereby accept the appointment as registered of signal of the state of Florida, Such change was authorican's board of directors. I hereby accept the appointment as registered of signal of directors. I hereby accept the appointment as registered agent and state of spicial statutes. SIGNATURE Signal of the State of Florida Statutes. (NOTE Registered Agent signal of Green Statutes) FIGURE Signal of Florida in the State of Florida Statutes. (NOTE Registered Agent signal of Green Statutes) FIGURE Signal of Florida in Florida in the State of Florida Statutes. (NOTE Registered Agent signal of Green Statutes) FIGURE Signal of Florida Statutes. (NOTE Registered Agent signal of Green Statutes) FIGURE Signal of Florida Statutes. (NOTE Registered Agent signal of Green Statutes) FIGURE Signal of Florida Statutes. (NOTE Registered Agent signal of Green Statutes) FIGURE Signal of Florida Statutes. (NOTE Registered Agent signal of Green Statutes) FIGURE Signal of Florida Statutes. (NOTE Registered Agent signal of Green Statutes) FIGURE Signal of Florida Statutes. (NOTE Registered Agent signal of Green Statutes) FIGURE Signal of Florida Statutes. (NOTE Registered Agent signal of Green Statutes) FIGURE Signal of Florida Statutes. (NOTE Registered Agent signal of Green Statutes) FIGURE Signal of Florida Statutes. (NOTE Registered Agent signal of Green Statutes) FIGUR Signal of Florida Statutes. (NOTE Registered Agent signal of Green Statutes) FIGUR Signal of Florida Statutes. (NOTE Registered Agent signal of Green Statutes) FIGUR Signal of Green Statutes (NOTE Registered Agent signal of Green Statutes) FIGUR Signal of Green Statutes (NOTE Registered Agent signal of Green Statutes) FIGUR Signal of Green Statutes (NOTE Registered	11. Pursuant to the provisions of Sections 617,0502 and 617,1508. Floridad Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617,0503, Floridad Statutes.	l			84 City	4400	El 85 Zip Code
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SIGNATURE	SIGNATURE Signaturit. Spot or printed name of registered agent and title if application. (NOTE: Registered Agent signaturit required when reinstating) Delete 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE D ALLEN, SUE STREET ADDRESS STREET ADDRESS STREET ADDRESS CITY-ST-ZP TITLE D CAMPBELL, SCOTT 22 NAME STREET ADDRESS CITY-ST-ZP TITLE D CHange Addition Addition Delete 21 TITLE D CHange Addition Addition CHANDO FL 32819 TITLE D CIFERS, DOUG STREET ADDRESS CITY-ST-ZP TITLE D CIFERS, DOUG STREET ADDRESS CITY-ST-ZP LAKELAND FL 33810 TITLE D CIFERS, DUG STREET ADDRESS CITY-ST-ZP LAKELAND FL 33810 TITLE D CHANGE STREET ADDRESS CITY-ST-ZP LONGWOOD FL 32750 TITLE D, ORGWOOD FL 32750 TITLE D, ORGWOOD FL 32750 TITLE D, ORGWOOD FL 32830 DELETE STREET ADDRESS CITY-ST-ZP TITLE D, ORGWOOD FL 32830 DELETE STREET ADDRESS CITY-ST-ZP ACTIV-ST-ZP TITLE D, ORGWOOD FL 32750 TITLE D, ORGWOOD FL 32830 DELETE STREET ADDRESS CITY-ST-ZP TITLE D, ORGWOOD FL 32830 DELETE STREET ADDRESS CITY-ST-ZP TITLE D, ORGWOOD FL 32750 TITLE D, ORGWOOD FL 32830 DELETE STREET ADDRESS CITY-ST-ZP TITLE D, ORGWOOD FL 32830 DELETE STREET ADDRESS CITY-ST-ZP TITLE D, ORGWOOD FL 32830 DELETE STREET ADDRESS CITY-ST-ZP TITLE D, ORGWOOD FL 32830 DELETE STREET ADDRESS CITY-ST-ZP AKE BUENA VISTA, FL 32830 DELETE STREET ADDRESS CITY-ST-ZP TITLE D, ORGWOOD FL 32830 DELETE STREET ADDRESS CITY-ST-ZP TITLE D, ORGWOOD FL 32830 DELETE STREET ADDRESS CITY-ST-ZP TITLE D, ORGWOOD FL 32830 DELETE STREET ADDRESS CITY-ST-ZP TITLE D, ORGWOOD FL 32830 DELETE STREET ADDRESS CITY-ST-ZP TITLE D, ORGWOOD FL 32830 DELETE STREET ADDRESS CITY-ST-ZP CRAME STREET ADDRESS STREET ADDR	agent. I	am familiar with, and accept the obligat	ions at, Section 617.0503, Flond	a Statutes.		
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TITLE	TITLE						S AND DIRECTORS IN 12
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Addition Change Change Addition Change C	Addition CITY-ST-ZIP CAMPBELL, SCOTT CAM	NAME					ļ
TITLE	TITLE	STREET ADDRESS	• • • • • • • • • • • • • • • • • • • •		1.3 STREET ADDRESS		j
NAME	NAME	CITY-ST-ZIP	ORLANDO FL 32809		1.4 CITY-ST-ZIP		Channe D Addition
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STREET ADDRESS 201 F PINE ST 6.3 STREET ADDRESS 6.3		(6.3 STREET ADDRESS		
					6.4 CITY-ST-ZIP		

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

407-897-3612