2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 22, 2002 8:00 am
Secretary of State
05-22-2002 90234 042 ***158.75

DOCUMENT # P97000068197

1. Entity Name
HANZE LIGHTHOUSE ACADEMY, INC.

Principal Place of Business	Mailing Address
72 MAGNOLIA DRIVE ST. AUGUSTINE FL 32084	421 S GOLDENROAD RD ORLANDO FL 32822

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	72 Magnolia Drv. Suite, Apt. #, etc.
City & State	City & State: St. Augustine FL.
Zip / Country	Zip: 32084 Country: St. Johns Co.

4. FEI Number 59-3462119 ☐ Applied For ☐ Not Applicable

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
HANZE, JULIO SR 1710 BILLINGSHURTS CT ORLANDO FL 32825	Name: Jennifer Fisher Street Address (P.O. Box Number is Not Acceptable): 1845 old Moultrie Rd. #77 City: St. Augustine **FL** Zip Code: 32084

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: Jennifer Fisher 4-25-02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE
Jennifer Fisher

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

FILE NOW!!! FEE IS $150.00
After May 1, 2002 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P HANZE, KARINA E 1710 BILLINGSHURTS CT ORLANDO FL 32825	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P/S/D Jennifer Fisher 1845 old Moultrie Rd. #77 St. Augustine FL. 32084	☒ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S HANZE, JULIO SR 1710 BILLINGSHURTS CT ORLANDO FL 32825	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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CR2E034 (9/01)

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Jennifer Fisher Pres 4-25-02 904-824-3926
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
Jennifer Fisher, Pres.