

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000111048

1. Entity Name

LEARN TO LEARN, INC.

f

FILED

Jul 20, 2000 8:00 am
Secretary of State

07-20-2000 90019 002 ***150.00

Principal Place of Business
6355 METRO WEST BLVD., SUITE 455
ORLANDO FL 32835

Mailing Address
6355 METRO WEST BLVD., SUITE 455
ORLANDO FL 32835

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

58-2531303

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

Name

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

City

FL

Zip Code

FADIGAN, JAMES
6355 METRO WEST BLVD., SUITE 455
ORLANDO FL 32835

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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

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FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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 CP
NAME Fadigan, James F.
STREET ADDRESS 6355 Metro West Blvd. #455
CITY-ST-ZIP Orlando, FL 32835

☐ Delete

TITLE VD
NAME Fadigan, John
STREET ADDRESS 6355 Metro West Blvd. #455
CITY-ST-ZIP Orlando, FL 32835

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/00)

ATTACHMENT
P9900P111048
DW709W

July 12,2000

To Whom It May Concern:

We received the "2000 Uniform Business Report" on July 10,2000, stating that it was a second request for the information. This entity "Learn to Learn, Inc." is a new business and has not been required to submit this form in the past. When we received the document with "Second Notice" we were concerned since we did not receive the original document. After phone conversation with your office, (Grace) advising me to submit the check for \$150.00 with this memo telling you what had transpired.

We can assure you that future payments will be submitted in their proper timeframe and we express our appreciation for your consideration on this matter.

Thank you,



Taelor Bowman
Office Manager
FEI 58-2531303
Learn To Learn, Inc.
6355 Metro West Blvd. Suite 455
Orlando, Fl. 32835
407-926-7203