

# 2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 03, 2001 8:00 am  
Secretary of State

02-03-2001 90055 033 \*\*\*\*70.00

DOCUMENT # 718291

1. Entity Name

ADULT LITERACY LEAGUE, INC.

Principal Place of Business

345 W. MICHIGAN ST.  
SUITE 100  
ORLANDO FL 32806  
US

Mailing Address

345 W. MICHIGAN ST.  
SUITE 100  
ORLANDO FL 32806  
US

2. Principal Place of Business

345 W. Michigan St. #100

3. Mailing Address

Same

City & State

Orlando, FL

City & State

Orlando, FL

Zip

32806

Country

USA

Zip

32806

Country

USA

4. FEI Number

23-7076600

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PANKOWIECKI, JOE  
1081 NODDING PINE WY  
CASSELBERRY FL 32707

7. Name and Address of New Registered Agent

Name

Katherine Vaccaro

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

1614 Lorena Lane

City

Orlando

FL

Zip Code

32806

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

Katherine Vaccaro

1/24/01

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

(NOTE: Registered Agent signature required when reinstating)

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PANKOWIECKI, JOE 1081 NODDING PINE WY CASSELBERRY FL 32707	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SDD YINGLING, LOIS 1251 QUEEN ELAINE DR. CASSELBERRY FL 32707	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP WEHRLE, ROYELLEN 2000 E MICHIGAN ST. ORLANDO FL 32806	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SQUIRES, GREY 940 HIGHLAND AVE. ORLANDO FL 32803	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ED WHIDDEN, JOYCE 924 N MAGNOLIA AVE 307 ORLANDO FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Katherine Vaccaro - Director (D) 1614 Lorena Lane Orlando, FL. 32806	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Johnny Metcalf - Director (D) OIA - 1 Airport Blvd. Airside Operation Orlando, FL. 32827	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Diana Griffin - director (D) 1312 Crescent Lake Dr, Windermere, FL. 34786	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice-President T. Grey Squires, Director (D) 940 Highland Ave, Orlando, FL. 32803	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Exec. Director Joyce Whidden 345 W. Michigan St. #100 Orlando, FL 32806	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:

Katherine Vaccaro

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/23/01 407-422-1540

Date Daytime Phone #

CR2E037 (10/00)