

2001 UNIFORM BUSINESS REPORT (UBR)

5/1

FILED
Jun 06, 2001 8:00 am
Secretary of State

05-14-2001 90059 007 ****61.25

DOCUMENT # 723853

1. Entity Name

CREATIVE LEARNING CENTER OF PENSACOLA, INC.

Principal Place of Business

C/O NAN TAYLOR
 3151 HYDE PARK RD.
 PENSACOLA FL 32503

Mailing Address

C/O NAN TAYLOR
 3151 HYDE PARK RD.
 PENSACOLA FL 32503

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

59-1433971

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

TAYLOR, NAN
 CREATIVE LEARNING CENTER
 3151 HYDE PARK RD
 PENSACOLA FL 32503

Name

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

City

FL

Zip Code

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

Nan P. Taylor Nan P. Taylor

4/30/01

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SKIPPER, LYNN 7725 MISTY PINES LN PENSACOLA FL 32526	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BILBREY, PAM 3327 BERKSHIRE CT PENSACOLA FL 32504	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T FLEISCHHAUER, BECKY, T 4785 VELASQUEZ DR PENSACOLA FL 32504	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD PARKER, SANDRA 301 WOODBINE DR PENSACOLA FL 32502	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP FORSHEE, JEFF, T 2581 BAYOU BLVD PENSACOLA FL 32503	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T RANKIN, WILLIAM 5775 AVENIDA WAY REAL PENSACOLA FL 32504	☒ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Simoni, Justine, T 1812 Yates Ave. Pensacola, FL 32503	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Meach, Loretta, T 3496 River Gardens Circle Pensacola, FL 32514	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ 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:

Signature of Officer or Director
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/01

Date

Daytime Phone #

CP2E037 (10/00)