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Apr 23 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 249442 1. Corporation Name <p style="font-size: 1.2em; margin-top: 10px;"><i>SPECKLED TEACH, INC</i></p>					
Principal Place of Business <p style="font-size: 1.1em; margin-top: 10px;"><i>105 Hwy 98 N. OKEECHOBEE, FL 34972</i></p>			Mailing Address <p style="font-size: 1.1em; margin-top: 10px;"><i>105 Hwy 98 N. OKEECHOBEE, FL 34972</i></p>		
2. Principal Place of Business 21 State, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 25 Suite, Apt. #, etc. 26 City & State 27 Zip 28 Country		3. Date Incorporated or Qualified <p style="font-size: 1.1em; margin-top: 10px;"><i>07-19-1961</i></p>	
21 <i>2685 N.E. 6TH COURT</i> 22 <i>OKEECHOBEE FL</i> 23 <i>34972</i> 24 <i>OKEECHOBEE</i>		25 <i>2685 N.E. 6TH COURT</i> 26 <i>OKEECHOBEE FL</i> 27 <i>34972</i> 28 <i>OKEECHOBEE</i>		3a. Date of Last Report <p style="font-size: 1.1em; margin-top: 10px;"><i>04-25-96</i></p>	
4. FEI Number <p style="font-size: 1.1em; margin-top: 10px;"><i>59-0980534</i></p>		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		8. Name and Address of Current Registered Agent <p style="font-size: 1.1em; margin-top: 10px;"><i>EVANKO, GEORGE 105 HWY 98 NORTH OKEECHOBEE, FL 34972</i></p>			
9. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code		<p style="font-size: 1.1em; margin-top: 10px;"><i>EVANKO, GEORGE 2685 N.E. 6TH COURT OKEECHOBEE FL 34972</i></p>			
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE: <i>George Evanko, President</i> DATE: <i>4/21/97</i>					
12. OFFICERS AND DIRECTORS 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <p style="font-size: 1.1em; margin-top: 10px;"><i>EVANKO, GEORGE 2685 N.E. 6TH COURT OKEECHOBEE, FL 34972</i></p>		
1.1 <i>P</i> 1.2 <i>EVANKO, GEORGE</i> 1.3 <i>105 HWY 98 NORTH</i> 1.4 <i>OKEECHOBEE, FL 34972</i> 2.1 <i>S/D</i> 2.2 <i>EVANKO, MARGARET</i> 2.3 <i>105 HWY 98 NORTH</i> 2.4 <i>OKEECHOBEE, FL 34972</i> 3.1 3.2 3.3 3.4 4.1 4.2 4.3 4.4 5.1 5.2 5.3 5.4 6.1 6.2 6.3 6.4			1.1 <input type="checkbox"/> DELETE 1.2 <input type="checkbox"/> DELETE 1.3 <input checked="" type="checkbox"/> DELETE 1.4 <input type="checkbox"/> DELETE 2.1 <input type="checkbox"/> DELETE 2.2 <input type="checkbox"/> DELETE 2.3 <input type="checkbox"/> DELETE 2.4 <input type="checkbox"/> DELETE 3.1 <input type="checkbox"/> DELETE 3.2 <input type="checkbox"/> DELETE 3.3 <input type="checkbox"/> DELETE 3.4 <input type="checkbox"/> DELETE 4.1 <input type="checkbox"/> DELETE 4.2 <input type="checkbox"/> DELETE 4.3 <input type="checkbox"/> DELETE 4.4 <input type="checkbox"/> DELETE 5.1 <input type="checkbox"/> DELETE 5.2 <input type="checkbox"/> DELETE 5.3 <input type="checkbox"/> DELETE 5.4 <input type="checkbox"/> DELETE 6.1 <input type="checkbox"/> DELETE 6.2 <input type="checkbox"/> DELETE 6.3 <input type="checkbox"/> DELETE 6.4 <input type="checkbox"/> DELETE		
14. I do 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.					
SIGNATURE: <i>George Evanko</i> DATE: <i>4/21/97</i> 941-763-2457					

CR2E034 (9/96)