## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 04 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 593767

(7)

appears in Block 12 or Block 13 is

SIGNATURE:

UNITED	SCHOOLS, INC.								
Principal Place	e of Business	Mailing Address				-{	AIDII BHREI A		)  <b>  </b>
2123 N. E. COA CLEARWATER F		2123 N. E. COACHMAN ROAD CLEARWATER FL 34625-2616							
						3. Date incorporated or Qualified 11/17/1978	1	ate of Last Re <b>06/1996</b>	eport
2. Principal Pi	lace of Business	2a. Mailing Address	2a. Mailing Address 26			4, FEI Number 59-1896147	Applied For Not Applicable		
Suite, Apt	<b>#, €</b> IC.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 / Fee Re	Additional additional
City & State	0	City & State				6. Election Campaign Financing		\$5.00	
<b>23</b>	Country	<b>28</b>	Cou	ntry		Trust Fund Contribution  8. This corporation has liability for	intangible	Added to tax under s.	
24	25	29	30				Yes		
	9. Name and Address of Curre	ent Registered Agent		81	Name	10. Name and Address of New Re	gistered	Agent	
	NS, H. MICHAEL								
2123 NE COACHMAN ROAD SUITE A				82 Street Address (P.O. Box Number is Not Accep			ole)		
CLE	ARWATER FL 34625			83					
				84	,		FL	.   `	Code
11. Pursuant office or nagent if a	to the provisions of Sections 607.05 egistered agent, or both, in the Stat in familiar with, and accept the obli-	02 and 607.1508, Florida Statu $e$ of Florida. Such change was gations of, Section 607.0505, Fl	les, the at authorized orida Stat	by utes	e-named corp the corporat s.	poration submits this statement for the ion's board of directors. I hereby acce	purpose o pt the app	f changing it pointment as	s registered registered
SIGNATURE	Signature, type dior printed name of registered a	ount and title if applicable (NO	E: Registered	f Age	ent signature requir	ed when reinstating)	DATE		
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFI	CERS AN	D DIRECTOR	IS IN 12
THLE	C	DELETE	1.1 TI	1.1 TITLE				Change	Addition
NAME	EYLER, GEORGE L.		. 1.2 NA	ME					
STREET ADDRESS	1504 HOVERSHAM DR		•		ADDRESS				
City - St - 7IP	NEW PORT RICHEY FL 3465	DELETE	1.4 CF 2.1 TC		ST - ZIP			Change	Addition
TITLE NAME	GORDON, JOHN	ניין טניניני		2.2 NAME					
STREET ADDRESS	2624 BRANDYWINE DR				ADDRESS				
CITY-ST-ZIP	CLEARWATER FL 34621		2. 4 CIT		ST - ZIP				
THLE		DELETE	3.1 Ti	ILE				Change	Addition
NAME			3.2 N/	ME					
STREET ADORESS					ADDRESS				
CITY-ST ZIP				_	ST-ZIP			Change	Addition
TIFLE			4.1 T(					C. Onlingo	Find Manager
NAME STREET ACORESS					ADDRESS				
CITY-ST ZIP					ST-ZIP				
TITLE				5.1 TITLE				Change	Addition
NAME			5.2 N	ME					
STREET ADORESS			5.3 ST	REET	ADDRESS				
City-St-Zir			5.4 Ci	5.4 CITY - ST - ZIP					
TITLE		DELETE	6.1 10					Change	Addition
NAME			6.2 NJ						
STREET ADDRESS					ADDRESS				
CHTY-S1-ZIF	l control of the cont	Control of the state of the sta			ST-ZIP	d in Coption 110 07/0V/I. Elevide Ctat.	oe 16 idh	or cortifu that	the
informatic	on indicated on this annual report of	supplemental annual report is	true and a	BOOL	urate and that	d in Section 119.07(3)(i), Florida Statut t my signature shall have the same leg rt as required by Chapter 607, Florida	ial effect a	as if made un	nder oath; that