

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2003 8:00 am
Secretary of State

0013704

DOCUMENT # 708266

1. Entity Name

ORLANDO SCIENCE CENTER, INC.



Principal Place of Business
777 EAST PRINCETON STREET
ORLANDO FL 32803
US

Mailing Address
777 EAST PRINCETON STREET
ORLANDO FL 32803
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 59-0896343

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

~~CAVENDISH, KIM M~~ *Brian Tonner*
777 EAST PRINCETON STREET
ORLANDO FL 32803

Name *Dr. Brian Tonner*
Street Address (P.O. Box Number is Not Acceptable)
777 E. Princeton St.
Orlando, FL 32803
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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Brian P. Tonner* President/Geo
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
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete
NAME *TC*
STREET ADDRESS *SOILEAU, M.J. PH.D.*
CITY-ST-ZIP *ADM 243, UNIVERSITY OF CENT. ORLANDO FL*

TITLE ☐ Change ☐ Addition
NAME *Kenneth S. Simback*
STREET ADDRESS *777 E Princeton St*
CITY-ST-ZIP *Orlando FL 32803 TC*

TITLE ☐ Delete
NAME *MCLEOD, JOYCE*
STREET ADDRESS *777 E PRINCETON ST*
CITY-ST-ZIP *ORLANDO FL*

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME *TT*
STREET ADDRESS *HARDING, MICHAEL*
CITY-ST-ZIP *777 E PRINCETON ST ORLANDO FL*

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME *PCFO*
STREET ADDRESS *CAVENDISH, KIM L*
CITY-ST-ZIP *777 E PRINCETON ST ORLANDO FL*

TITLE ☒ Change ☐ Addition
NAME *DR. BRIAN TONNER*
STREET ADDRESS
CITY-ST-ZIP *Pers/CEO*

TITLE ☐ Delete
NAME *TC*
STREET ADDRESS *SIMBACK, KENNETH*
CITY-ST-ZIP *777 EAST PRICETON STREET ORLANDO FL*

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Delete
NAME *D*
STREET ADDRESS *CAVENDISH, KIM L*
CITY-ST-ZIP *777 E PRINCETON ST ORLANDO FL*

TITLE ☐ Change ☒ Addition
NAME *Ed Foster - ST*
STREET ADDRESS *777 E. Princeton St*
CITY-ST-ZIP *Orlando FL 32803*

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: *Brian P. Tonner* Brian P. Tonner, 4/21/03

CR2E037 (10/02)