## 2000 UNIFORM BUSINESS REPORT (UBR)

## **FILED** May 15, 2000 8:00 am Secretary of State DOCUMENT # 763290 1. Entity Name INTEGRAL KNOWLEDGE STUDY CENTER, INC. 05-15-2000 90254 048 \*\*\*\*61.25 Principal Place of Business Mailing Address % RAND HICKS % RAND HICKS 221 CLEMATIS STREET 221 CLEMATIS STREET PENSACOLA FL 32503 PENSACOLA FL 32503-2836 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-2230346 Not Applicable Zìp Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) HICKS, RAND 221 CLEMATIS STREET PENSACOLA FL 32503 City 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 DATE Signature, typed or printed name of registered agent and title if applicable. 9. Election Campaign Financing \$5.00 May Be Make Check Payable to FILE NOW: Trust Fund Contribution. Added to Fees Department of State **FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10.01 #USE STREET OFFICERS AND DIRECTORS 11. ☐ Change ☐ Addition TITLE □ Delete TITLE NAME HICKS, RAND NAME STREET ADDRESS STREET ADDRESS 221 CLEMATIS ST CITY-ST-ZIP CITY-ST-ZIP PENSACOLA, FL 00000 ☐ Change ☐ Addition TITLE □ Delete TITLE NAME IRENE D PENNER NAME STREET ADDRESS STREET ADDRESS 880 GERHARDT DR CITY-ST-ZIP CITY-ST-ZIP PENSACOLA, FL 00000 Addition ۷D Change ☐ Delete TITLE TITLE WOLFRAM VERLAAN NAME NAME STREET ADDRESS 1035 BRIXWORTH PLACE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP atlanta ga TSD CAMERON tsd TITLE Change Addition TITLE Delete CHRIS LIGHTFOOT, SUSAN 491 TANGLEWOOD DR. NAME NAME STREET ADDRESS STREET ADDRESS 342 VALENCIA STREET PENSTURIA FL 32503 CITY-ST-ZIP CITY-ST-ZIP GULF BREEZE FL Addition Delete TITI F Change TITLE BILL FLICK SKRUTSKIE, DIANE NAME 163 WINDSOR CT. STREET ADDRESS 2201 VANGHN LAKES BLVD STREET ADDRESS 76830 AL ALBURN CITY-ST-ZIP CITY-ST-ZIP MONTGOMERY AL-☐ Addition TITLE ☐ Change ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling 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 a other like empowered.

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SIGNATURE: SIGNATURE RELAXURETED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Date