2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F94000003785

Feb 04, 2002 8:00 AM Secretary of State

Entity Name: NATIONAL INSTITUTE FOR LEARNING DISABILITIES, INC.

Current Principal Place of Business: New Principal Place of Business: 107 SEEKEL STREET NORFOLK, VA 23505 **Current Mailing Address: New Mailing Address:** 107 SEEKEL STREET NORFOLK, VA 23505 FEI Number: 54-1506977 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MARTIN ANNA W MARTIN, ANNA W 8800 W COLONIAL DR 800 N PINE HILLS RD OCOEE, FL 34761 ORLANDO, FL 32812 US 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: ANNA W. MARTIN 02/04/2002 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition UECKER, MILTON V Name: Name: 1912 LORICK RD Address: Address: City-St-Zip: BLYTHEWOOD, SC 29016 City-St-Zip: Title: SD () Delete Title: SD (X) Change () Addition Name: LATSKO, MIKE Name: LATSKO, MIKE Address: 7120 GRANBY ST Address: 7000 GRANBY ST City-St-Zip: NORFOLK, VA 23505 City-St-Zip: NORFOLK, VA 23505 Title: () Delete Title: () Change () Addition MCNIFF, GENE Name: Name: 5101 CLEVELAND STREET, SUITE 104 Address: Address: City-St-Zip: VIRGINIA BEACH, VA 23462 City-St-Zip: Title: () Delete Title: () Change () Addition Name: BERRY, SHARON Name: 3115 CLUB DR Address: Address: City-St-Zip: BIRMINGHAM, AL 35226 City-St-Zip: Title: () Delete Title: () Change () Addition TANIS, KEN Name: Name: 462 MALIN RD Address: Address: NEWTON SQUARE, PA 19073 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition MCKINNEY, WILLIAM Name: Name: Address: 700 S ENGLISH STATION RD Address: LOUISVILLE, KY 40245 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MIKE LATSKO SD 02/04/2002

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ED WALKER (D) 508 LEWISHAM CT. COLUMBIA, SC 29210

DAVID PATTERSON (D) 255 THOLE ST. NORFOLK, VA 23505

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SANDY OUTLAR (D) 60 SANDY COVE RD. NORTH EAST, MD 21901

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