## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED DOCUMENT # F9800000184 Mar 15, 2000 8:00 am Entity Name **Secretary of State** SOUTHWEST STUDENT SERVICES CORPORATION 03-15-2000 90061 049 \*\*\*\*61.25 Principal Place of Business Mailing Address 1555 N. FIESTA BLVD. 1555 N. FIESTA BLVD. GILBERT AZ 85233-1020 : ==== AZ 85233 しりひとうろうる 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 86-0719662 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) MORRIS, JUDITH 10420 SW 77TH AVENUE MIAMI FL 33156 Zip Code City 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 (NOTE: Registered Agent signature required when reinstating) . . 9. Election Campaign Financing Make Check Payable to FILE NOW: **\$5.00** May Be Trust Fund Contribution. Added to Fees Department of State **FEE IS \$61.25** OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. ☐ Change ☐ Addition Delete TITLE D \*. 1<sub>5</sub> , BARBERINI, PAUL G NAME NAME JENKINS, WILLIAM STREET ADDRESS STREET ADDRESS 1555 N. Fiesta Blvd. CITY-ST-ZIP CITY-ST-ZIE Gilbert, AZ 85233-1020 ☐ Addition Change Delete TITLE TITLE NAME krietemeyer. Mark e LINDEMAN, ANNE STREET ADDRESS STREET ADDRESS 1555 N. Fiesta Blvd. 1555 N. Fiesta\_Blvd. CITY-ST-ZIP 85233-1020 CITY-ST-ZIP Gilbert, AZ 85233-1020 Gilbert, AZ D ☐ Change Addition TITLE STD ☐ Delete TITLE NAME LOPEZ, RONNIE NAME stephens, alan STREET ADDRESS 1555 N. Fiesta Blvd. 1555 N. Fiesta Blvd. Gilbert, AZ 85233-1020 STREET ADDRESS CITY-ST-ZIP Gilbert, AZ 85233-1020 Gilbert, AZ CITY-ST-ZIF ☐ Addition ☐ Change TITLE TITLE Delete MORFESSIS, IOANNA NAME NAME roig, vincent STREET ADDRESS 1555 N. Fiesta Blvd. STREET ADDRESS 1555 N. Fiesta Blvd. 85233-1020 CITY-ST-ZIP Gilbert, AZ 85233-1020 CITY-ST-7IP Gilbert, AZ VP ☐ Change ☐ Addition ☐ Delete TIT! F HURTT, CRAIG NAME NAME aripoli, don a STREET ADDRESS 1555 N. Fiesta Blvd. STREET ADDRESS 1555 N. Fiesta Blvd. Gilbert, AZ 85233-1020 CITY-ST-ZIP CITY-ST-ZIP Gilbert, AZ 85233-1020 ☐ Addition Change Delete TITLE NAME HOLMES, GREGG Betts, Steve STREET ADDRESS | 1555 N. Fiesta Blvd. CITY-ST-ZIP Gilbert, AZ 85233-1020 STREET ADDRESS 1555 N. Fiesta Blvd.

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 of trusted 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 attach with all other like empow

CITY-ST-ZIP

Gilbert, AZ

SIGNATURE:

85233-1020

A Hachment & C0025352 8 # F98000000107 2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # F9800000184 SOUTHWEST STUDENT SERVICES CORPORATION Principal Place of Business Mailing Address 1555 N. FIESTA BLVD. 1555 N. FIESTA BLVD. CILDERT AZ 85233 GILBERT AZ 85233-1020 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number Applied For City & State 86-0719662 Not Applicable Zip \$8.75 Additional Country Country 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) MORRIS, JUDITH 10420 SW 77TH AVENUE **MIAMI FL 33156** 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW: Make Check Payable to \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. Addition Delete TITLE Change AT NAME NAME CHESIN, MICHAEL STREET ADDRESS STREET ADDRESS 1555 N. Fiesta Blvd. CITY-ST-ZIP CITY-ST-ZIP Gilbert, AZ 85233-1020 Delete TITLE Change Addition NAME CANTOR, RICKI STREET ADDRESS STREET ADDRESS 1555 N. Fiesta Blvd. CITY-ST-ZIP CITY-ST-ZIP Gilbert, AZ 85233-1020 CFO/VP ☐ Delete TITLE ☐ Change Addition TITLE NAME NAME CHAPIN, RICHARD 1555 N. Fiesta Blvd. STREET ADDRESS STREET ADDRESS Gilbert, AZ 85233-1020 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 of 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

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