2002 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 18, 2002 8:00 am Secretary of State DOCUMENT # F9800002173 THE LEARNING INITIATIVE INCORPORATED 02-18-2002 90002 046 ****61.25 Principal Place of Business Mailing Address 316 WEST 12TH STREET 316 WEST 12TH STREET AUSTIN TX 78701-1840 AUSTIN TX 78701-1840 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 74-2859814 Not Applicable Country \$8.75 Additional Ζip Country 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) GLEDICH, NICHOLAS DR. 1003 FEATHERSTONE CIR. OCOEE FL 34761-3411 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable Make Check Pavable to 9. Election Campaign Financing \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Department of State Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. ☐ Delete Change ☐ Addition TITLE TIT1 F HOLTZMAN, WAYNE H PH.D. NAME NAME 316 WEST 12TH STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP AUSTIN TX 78701-1840 ☐ Change ☐ Addition ☐ Delete TITLE TITLE GLEDICH, NORA F NAME 1003 FEATHERSTONE CIR. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP -OCOEE FL 34761-3411 Change ☐ Addition ☐ Delete TITLE TITLE WISNESKI, WILLIAM J NAME NAME 786 STRAWBERRY HILL ROAD STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP CONCORD MA 01742 ☐ Change Addition ☐ Delete TITLE TITLE WILLIAMSON; THOMAS A NAME NAME **5 CHEVERY COURT** STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP AUSTIN TX 78738-1511 ☐ Addition Change ☐ Delete TITLE WILLIAMSON, KATHRYN W NAME NAME 5 CHEVERY COURT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP AUSTIN TX 78738-1511 CITY-ST-ZIP Change ☐ Addition Delete TITLE TITLE SMITH, ANGELA NAME NAME 9209 SIMMONS ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP AUSTIN TX 78759

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 of the corporation or the received THOMAS A CACCEMION