FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # +49689 1. Entity Name Scott Mill Lane Schools Inc.



SECRETARY OF STATE 03 MAY 12 AM 9: 40

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	lace of Business	3. Mailing Address									
	Mill Lane Schools Inc	Same		DO NOT WRITE IN THIS SPACE							
	Scott Mill Lane	Suite, Apt. #, etc.				E 					
City & State	sonville FL	City & State				Number 39-250630	1		Applied Fe		
Zip 322	Country	Zip	Count	ry	5 . Cer	tificate of Status Desired	×		75 Additional Required		
nalis e a la l					7. Name	and Address of Currer	t Register	ed Age	ent		
		la sa	2 Bullet								
	DO NOT W	RITE	(P.O. Box	10 13000 eys (P.O. Box Number is Not Acceptable)							
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	IN THIS SE	AUE									
				City Jac	KSO	nuille	F	L	Zip Code 32223	,	
	named entity submits this statement for	the purpose of changing its	registere	ed office or registe	ered agent	, or both, in the State of F	lorida. I an	n familia	ar with, and acc	ept	
the obligat	ions of registered agent.										
CIONATUDE										}	
	Signature, typed or printed name of registered agent at	nd title if applicable. (NOTE	: Registered	Agent signature require	ed when reinsta	ating)	DATÉ				
	nuary 1 - May 1 Fee Is \$150.00 After May 1, Fee Is \$550.00					9. Election Campaign Fi	nancing		\$5.00 May	B.	
	Amended UBR is \$61.25					Trust Fund Contribution		X	Added to Fee		
April 100 March 101 Company	Payable to Florida Department of	214-late-attent-late-attent					· · · · · · · · · · · · · · · · · · ·				
10.	OFFICERS AND D		49,170.3	T		CALLED COMMITTEE STATE OF THE S					
TITLE NAME	President - D		TITLE	ARTHUR TO THE PROPERTY OF THE							
STREET ADDRESS	Daisy BOW	ers	TANK 1-19. 3	T ADDRESS	earl e de la care. Es composito de	Angling Landon Co.				3	
CITY-ST-ZIP	2911 Scott Mill Le	ine 32223	CITY	ST-ZIP			ない。また野崎 さいない質り		to anni an material. The call and the real and	學者	
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NAME		aul Bowers	NAME	Section of the Control of the Contro						ا ا	
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TITLE	Drana K Bow	ers - Secretary	TITLE			and the second second	A. P. Art.				
NAME STREET ADDRESS	2011 South Mi	11 Place	NAME	T ADDRESS			The second	4 X 4 W		* 14	
CITY-ST-ZIP	Drana K Bow 2811 Scott Mi	37223	CITY	ST-ZIP		DO NOT	WR	H		*	
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NAME	John Phillip Bou	vers - Ireas.	NAME			INTHIS	JPA	UE		· · · · · · · · · · · · · · · · · · ·	
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CITY-ST-ZIP	F80 3001 Mill	32727	CITY-	ST-ZIP	400554		200		nicol Carry	精之前	
TITLE		-	TITLE	APPROPRIEST CONTRACTOR	ESTRICT LES				1. 医脑膜中隔隔膜	镇 劃	
NAME			NAME	Application for the party of the		angar bangangan angar 1974 - 1 Sangar sa kanangangan	STATE OF THE PARTY	The Party	1. 西域。		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florica 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 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

NAME

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

Bowers

STREET ADDRESS

CITY-ST-ZIP