

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 16 AM 10:50

DOCUMENT # J13036

(5)

1. Corporation Name

INNOVATIVE EDUCATORS, INC.

Principal Place of Business

% BEATRICE HUNTER
1510 INGRAM DRIVE
SUN CITY CENTER FL 33573

Mailing Address

% BEATRICE HUNTER
1510 INGRAM DRIVE
SUN CITY CENTER FL 33573

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

05/01/1986

3a. Date of Last Report

01/20/1994

4. FEI Number

11-2534315

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

HUNTER, BEATRICE
1510 INGRAM DRIVE
SUN CITY CENTER FL 33570

10. Name and Address of New Registered Agent

81

Name

HUNTER, RICHARD P.

82

Street Address (P.O. Box Number is Not Acceptable)

1510 INGRAM DRIVE

83

84

City

SUN CITY CENTER

FL

85

Zip Code

33570

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Richard P. Hunter

3/14/95

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

PSD
HUNTER, BEATRICE
1510 INGRAM DRIVE
SUN CITY CENTER FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

VTD
HUNTER, RICHARD P.
1510 INGRAM DRIVE
SUN CITY CENTER FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

VD

HUNTER, BEATRICE
1510 INGRAM DRIVE
SUN CITY CENTER FL

PSD

HUNTER, RICHARD P.
1510 INGRAM DRIVE
SUN CITY CENTER FL

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Richard P. Hunter

RICHARD P. HUNTER

3/14/95

813 634-6334

Signature and typed or printed name of signing officer or director

Date

Telephone #