

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
May 05, 1999 8:00 am  
Secretary of State

05-05-1999 90049 036 \*\*\*150.00

DOCUMENT # J79319

1. Corporation Name

NATIONAL TEACHER ASSOCIATES OF FLORIDA, INC.

Principal Place of Business

4949 KELLER SPRINGS RD.  
DALLAS TX 75248-5910

Mailing Address

4949 KELLER SPRINGS RD.  
DALLAS TX 75248-5910

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/24/1987

4. FEI Number

75-2189425

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 owes the current year Intangible  
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

Addison, TX

24 Zip

75001

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

Addison, TX

28 Zip

75001

Country

30

9. Name and Address of Current Registered Agent

NRAI SERVICES, INC.  
526 E. PARK AVE.  
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS ☐ DELETE

TITLE PD  
NAME ELLARD, BILL J.  
STREET ADDRESS 5220 SPRG. VALLEY RD 400  
CITY-ST-ZIP DALLAS TX

TITLE D  
NAME MARTIN, RAYMOND J.  
STREET ADDRESS 5220 SPRG. VALLEY RD 400  
CITY-ST-ZIP DALLAS TX

TITLE TSD  
NAME LANGHAM, JAMES T. JR.  
STREET ADDRESS 5220 SPRG. VALLEY RD 400  
CITY-ST-ZIP DALLAS TX

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☒ Change ☐ Addition

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS 4949 Keller Springs Road  
1.4 CITY-ST-ZIP Addison, TX 75001

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS 4949 Keller Springs Road  
2.4 CITY-ST-ZIP Addison, TX 75001

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS 4949 Keller Springs Road  
3.4 CITY-ST-ZIP Addison, TX 75001

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

14. 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 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, with all other like empowered.

SIGNATURE:

JAMES T. LANGHAM, JR.  
SEC. / Treas.

4/27/99

Date

(972) 532-2100

Daytime Phone #

CR2E034 (11/98)

0584485