

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 07, 2002 8:00 am
Secretary of State

05-07-2002 90392 046 ****50.00

DOCUMENT # L01000009199

1. Entity Name

EDUCATIONAL SYMPOSIA ACQUISITION, LLC

Principal Place of Business

**601 N. ASHLEY DRIVE
 SUITE 500
 TAMPA FL 33602**

Mailing Address

**601 N. ASHLEY DRIVE
 SUITE 500
 TAMPA FL 33602**

2. Principal Place of Business

**4515 George Rd
 Ste 355**

3. Mailing Address

**4515 George Rd
 Ste 355**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Tampa FL

City & State

Tampa FL

Zip

33634

Country

Zip

33634

Country

4. FEI Number

03-0404262

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**LECK, P. JEFFREY
 601 N. ASHLEY DRIVE
 SUITE 500
 TAMPA FL 33602**

7. Name and Address of New Registered Agent

**Name: Stephen Hunter
 Street Address (P.O. Box Number is Not Acceptable):
 4515 George Rd
 Ste 355
 City: Tampa FL Zip Code: 33634**

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

Stephen Hunter

4-22-02

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$50.00
 Make Check Payable to Department of State
 Due By May 1, 2002**

9. MANAGING MEMBERS/MANAGERS

**TITLE: mbrm
 NAME: P. Jeffrey Leck
 STREET ADDRESS: 601 N. Ashley Drive Ste 500
 CITY-ST-ZIP: Tampa FL 33602**

☐ Delete

**TITLE: mbrm
 NAME: John Kirtley
 STREET ADDRESS: 601 N. Ashley Drive Ste 500
 CITY-ST-ZIP: Tampa FL 33602**

☐ Delete

**TITLE: ☐ Delete
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:**

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 STREET ADDRESS:
 CITY-ST-ZIP:**

10. ADDITIONS/CHANGES

**TITLE: ☐ Change ☒ Addition
 NAME:
 STREET ADDRESS: →
 CITY-ST-ZIP:**

**TITLE: ☐ Change ☒ Addition
 NAME:
 STREET ADDRESS: →
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 NAME:
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 CITY-ST-ZIP:**

**TITLE: ☐ Change ☐ Addition
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:**

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

Stephen Hunter

4-24-02

813 806 1004

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083 (9/01)