

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **L99000006224**

1. Entity Name
INTERNATIONAL CENTER FOR EXCELLENCE IN EDUCATION

FILED

01 APR 12 AM 9:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address
5500 34TH STREET W 5500 34TH STREET W
BRADENTON FL 34210 BRADENTON FL 34210



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

4. FEI Number Applied For
65-0951597 Not Applicable

Zip Country Zip Country 5. Certificate of Status Desired **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent

MCCOMB, WILLIAM E
2828 S. TAMiami TRAIL
SARASOTA FL 34239

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** 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 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

9. MANAGING MEMBERS/MEMBERS

10. ADDITIONS/CHANGES

9. MANAGING MEMBERS/MEMBERS		10. ADDITIONS/CHANGES	
TITLE	NAME	TITLE	NAME
<input type="checkbox"/> Delete	MGR MCCOMB, WILLIAM E 2828 S. TAMiami TRAIL SARASOTA FL 34239	<input type="checkbox"/> Change <input type="checkbox"/> Addition	200004036562--7 -04/20/01--01113--014 *****50.00 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
<input type="checkbox"/> Delete	MGR BAND, DAVID S 240 S. PINEAPPLE AVENUE, 10TH FLOOR SARASOTA FL 34236	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete	MGR ODELL, RICHARD 5500 34TH STREET W BRADENTON FL 34210	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	

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: *Richard F. Odell* DATE: **3/28/01** DAYTIME PHONE #: **941-739-3964**

CR2E083 (11/00)