

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 09, 2001 8:00 am
Secretary of State

05-02-2001 90029 001 ****70.00

DOCUMENT # N00000003709

1. Entity Name

BAY VILLAGE CENTER FOR EDUCATION, INC

Principal Place of Business

C/O STUDY BUDDY
 1405 MARTIN LUTHER KING (9TH) ST. NORTH
 ST. PETERSBURG FL 33704

Mailing Address

C/O STUDY BUDDY
 1405 MARTIN LUTHER KING (9TH) ST. NORTH
 ST. PETERSBURG FL 33704

2. Principal Place of Business

3. Mailing Address

7359 14th St So.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

St. Petersburg, FL.

City & State

City & State

33705

Zip

Country

Zip

Country

USA

4. FEI Number

59-3721204

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DINOIA, DENNIS

2426 FORTY NINTH ST. NORTH

ST. PETERSBURG FL 33704 33710

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 \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

Make Check Payable to
 Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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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), Florida 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Signature of Dennis Dinoia April 19, 2001 622/946-0357

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

CR2E037 (10/00)