

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 01, 2001 8:00 am
Secretary of State

02-01-2001 90120 026 ****70.00

DOCUMENT # N00000004693

1. Entity Name

FAMILY EDUCATION CENTER, INC.

Principal Place of Business

22 HIGHWAY 40
 INGLIS FL 34449

Mailing Address

22 HIGHWAY 40
 INGLIS FL 34449

2. Principal Place of Business

22 Highway 40

3. Mailing Address

SAME AS BUSINESS

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Inglis, FL

City & State

4. FEI Number

31-1721770

Applied For

Not Applicable

Zip

34449

Country

USA

Zip

Country

5. Certificate of Status Desired

☒

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

POULOS, GREGORY G
48 AZALEE AVENUE
INGLIS FL 34449

7. Name and Address of New Registered Agent

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

TITLE: President ☐ Delete
 NAME: William B. Paterson, III
 STREET ADDRESS: 10865 N. Aloha Point
 CITY-ST-ZIP: Crystal River, FL 34428

TITLE: Treasurer ☐ Delete
 NAME: Gregory G. Poulos
 STREET ADDRESS: 48 Azalee Avenue
 CITY-ST-ZIP: Inglis, FL 34449

TITLE: Secretary ☐ Delete
 NAME: William Goldsby, III
 STREET ADDRESS: 32 Risher Avenue
 CITY-ST-ZIP: Inglis, FL 34449

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

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

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: P/D ☐ Change ☐ Addition
 NAME: William B Paterson, III
 STREET ADDRESS: 10865 N. Aloha Point
 CITY-ST-ZIP: Crystal River, FL 34428

TITLE: T/D ☐ Change ☐ Addition
 NAME: Gregory G. Poulos
 STREET ADDRESS: 48 Azalee Avenue
 CITY-ST-ZIP: Inglis, FL 34449

TITLE: S/D ☐ Change ☐ Addition
 NAME: Charles William Goldsby, III
 STREET ADDRESS: 32 Risher Avenue
 CITY-ST-ZIP: Inglis, FL 34449

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

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

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

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: *Gregory G. Poulos* **Gregory G. Poulos** Jan. 24, 2001 (352) 447-4800

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)