2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N00000005173

FILED May 12, 2003 Secretary of State

Entity Name: COLOURS SCHOOL OF THE ARTS OF SOUTH WEST FLORIDA INC.

Current Principal Place of Business: New Principal Place of Business: 2241/43 FOWLER STREET FT MYERS, FL 33901 **Current Mailing Address: New Mailing Address:** P.O. BOX 60883 2241/43 FOWLER STREET FT MYERS, FL 33906 FT MYERS, FL 33901 FEI Number: 65-1091166 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HILL-HENTON, SHARON I 2241/43 FOWLER STREET FT MYERS, FL 33901 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition HILL-HENTON, SHARON Name: Name: 1706 14TH STREET E Address: Address: City-St-Zip: LEHIGH ACRES, FL 33972 City-St-Zip: Title: () Delete Title: (X) Change () Addition JOHNSON-STEVENS, CECILE Name: MATHEWS WILLIAMS, JACQUIE Name: Address: 3717 SW 14TH PLACE Address: 217 SW 10TH TERRACE City-St-Zip: CAPE CORAL, FL 33914 City-St-Zip: CAPE CORAL, FL 33991 Title: () Delete Title: () Change () Addition PACETTI, CRISTINE H Name: Name: 7131 PHILIPS CREEK CT Address: Address: City-St-Zip: FT MYERS, FL 33908 City-St-Zip: Title: TD () Delete Title: () Change () Addition Name: KING, KENNETH Name: Address: 106 ORTONA STREET Address: City-St-Zip: LEHIGH ACRES, FL 33936 City-St-Zip: Title: () Delete Title: (X) Change () Addition LEMAR, AVENELL JUNE, VINCENT G PHD Name: Name: 4805 SORRENTO CT 1801 BRANTLEY ROAD # 205 Address: Address: City-St-Zip: CAPE CORAL, FL 33904 City-St-Zip: FORT MYERS, FL 33907 Title: () Delete Title: (X) Change () Addition FERGUSON, SANFORD MESSINA, GALYN Name: Name: Address: 5336 ANN ARBOR DR Address: 2363 UNION STREET BOKEELIA, FL 33922 City-St-Zip: FORT MYERS, FL 33901 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHARON HILL-HENTON ED 05/12/2003