

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N00000006265

FILED
Jul 03, 2002 8:00 AM
Secretary of State

Entity Name: CENTER FOR VOCATIONAL TRAINING, INC.

Current Principal Place of Business:

7822 GARDNER DR #202
NAPLES, FL 34109

New Principal Place of Business:

Current Mailing Address:

7822 GARDNER DR #202
NAPLES, FL 34109

New Mailing Address:

FEI Number: 59-3675654

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, WILLIAM N
7822 GARDNER DR #202
NAPLES, FL 34109 US

Name and Address of New Registered Agent:

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:

Title: D () Delete
Name: SMITH, WILLIAM N
Address: 7822 GARDNER DR #202
City-St-Zip: NAPLES, FL 34109

Title: D () Delete
Name: SMITH, WILLIAM N
Address: 7822 GARDNER DR #202
City-St-Zip: NAPLES, FL 34109

Title: D () Delete
Name: SMITH, ABRAHM
Address: 12201 MARA LYNN RD #510
City-St-Zip: LITTLE ROCK, AR 72211

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: WILLIAM N SMITH

D

07/03/2002

Electronic Signature of Signing Officer or Director

Date