

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N00000006324

FILED
Jan 14, 2002 8:00 AM
Secretary of State

Entity Name: TRAINING RESOURCES COUNCIL INTERNATIONAL, INC.

Current Principal Place of Business:

3333 20TH ST
VERO BEACH, FL 32960

New Principal Place of Business:

Current Mailing Address:

3333 20TH ST
VERO BEACH, FL 32960

New Mailing Address:

FEI Number: 59-3715501

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BERG, PAUL R
3333 20TH ST
VERO BEACH, FL 32960

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: VOCELLE, LOUIS B JE
Address: 3333 20TH ST
City-St-Zip: VERO BEACH, FL 32960

Title: D () Delete
Name: PEELER, CAROLYN
Address: 655 21ST ST
City-St-Zip: VERO BEACH, FL 32960

Title: D () Delete
Name: JOHNSON, CAROL K
Address: P.O. BOX 2606
City-St-Zip: VERO BEACH, FL 32961

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: LOUIS B. VOCELLE, JR.

D

01/14/2002

Electronic Signature of Signing Officer or Director

Date