

2002 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 07, 2002 8:00 am
Secretary of State

02-07-2002 90078 008 ****61.25

DOCUMENT # N01000003356

1. Entity Name

C2T2 EDUCATIONAL SYSTEMS, INC.

Principal Place of Business

**MAINLAND HIGH SCHOOL ADMINISTRATION OFFICE
125 SOUTH CLYDE MORRIS BLVD
DAYTONA BEACH FL 32114**

Mailing Address

**MAINLAND HIGH SCHOOL ADMINISTRATION OFFICE
125 SOUTH CLYDE MORRIS BLVD
DAYTONA BEACH FL 32114**

2. Principal Place of Business

2753 S. Ridgewood Ave

Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 7070

Suite, Apt. #, etc.

City & State

South Daytona FL

City & State

Daytona Beach FL

Zip

32119

Country

Volusia

Zip

32116

Country

Volusia

4. FEI Number

59-3723699

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**JOHN S. NORTON, JR., P.A.
431 B. NORTH GRANDVIEW AVE
DAYTONA BEACH FL 32118**

7. Name and Address of New Registered Agent

Name **DOUGLAS K JACKSON**

Street Address (P.O. Box Number is Not Acceptable)

2753 S. Ridgewood Ave

City

South Daytona

FL

Zip Code

32119

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	D	<input checked="" type="checkbox"/> Delete
NAME	RANSOM, MARSHALL R	
STREET ADDRESS	26 ORIOLE CIRCLE	
CITY-ST-ZIP	ORMOND BEACH FL 32176	
TITLE	D	<input type="checkbox"/> Delete
NAME	JACKSON, DOUGLAS K	
STREET ADDRESS	3051 S. ATLANTIC AVE #1606	
CITY-ST-ZIP	DAYTONA BEACH FL 32118	
TITLE	D	<input type="checkbox"/> Delete
NAME	WILBUR, A. WAYNE	
STREET ADDRESS	620 NEWTON ROAD	
CITY-ST-ZIP	PORT ORANGE FL 32127	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Secretary - S	<input type="checkbox"/> Delete
NAME	Robert Downs	Addition
STREET ADDRESS	2525 Sandy Plains Rd	
CITY-ST-ZIP	Marietta, GA 30066	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PRESIDENT - P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DOUGLAS K. JACKSON	
STREET ADDRESS	3051 S. Atlantic Ave #1003	
CITY-ST-ZIP	Daytona Beach FL 32118	
TITLE	CFO - T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DAVID R. ROOKS	
STREET ADDRESS	3051 S. Atlantic Ave #2004	
CITY-ST-ZIP	Daytona Beach, FL 32118	
TITLE	Chairperson - C	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Patsy Graham	
STREET ADDRESS	124 S. Clyde Morris Blvd	
CITY-ST-ZIP	Daytona Bch, FL 32114	
TITLE	Vice Chairperson - VC	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Tim Huth	
STREET ADDRESS	P.O. Box 2118	
CITY-ST-ZIP	Deland, FL 32721-2118	
TITLE	Director - D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Karen Cohen	
STREET ADDRESS	9 Cliff Road	
CITY-ST-ZIP	Weston, MA 02493	
TITLE	Director - D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Jim Mirrieless	
STREET ADDRESS	2175 N. Pierce St.	
CITY-ST-ZIP	Arlington, VA 22209	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(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 REQUIRED

1-20-02

386-760-0420

CR2E037 (9/01)