2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N02000003487

THE VISUAL HISTORY & LEARNING PROJECT, INC.



FILED May 01, 2003 8:00 am § Secretary of State 05-01-2003 90155 040 ****61.25

Mailing Accesses 28 SERC CENTER DRIVE #A-104 WEST PALM BEACH R. 33401 2. Principal Place of Business Suize, Act #. 46. 2. Principal Place of Universes Suize, Act #. 46. 3. Mailing Address Suize, Act #. 46. City & State A. FEI Number 97 — 14 2 97 31 Applied For International Place of Country Place A. Place and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name JORDAN, JOAN 325 DEEC CENTER DRIVE #A-104 WEST PALM BEACH R. 33401 City & State B. Tipe above names ently submits tile satement for the purpose of changing the registered agent, or both, in reg State of Platta. I am familiar with, and accept the obligations of registered agent. SIGNATURE FILE NOW: FEE IS \$61.25 9. Election Commont Financing File Now. FILE NOW: FEE IS \$61.25 9. Election Commont Financing Trust Fund Contribution 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10. THE MAKE STREAM DIRECTORS IN 10. DIRECTORS IN 10. THE MAKE STREAM DIRECTORS IN 10. DIRECTO				"	WE TE					
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Series and Address of Current Registered Agent S. Neme and Address of Current Registered Agent Street Address (PO. Box Number is Not Acceptable) City FL Zip Code S. 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. I am familiar with, and acceptable of the obligations of rogethers agent. SIGNATURE	Suite, Apt. #, etc.		Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES				
September 1	City & State		City & State			4. FEI Number 3-	1-14291=	Ar No		
Signature State	Zip	Zip Country Z		p Country				\$8.75 Add	ditional	
Name		6. Name and Address of Current	Registered Agent			7. Name and Address of New Registered Agent				
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S. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE SIGNATURE SIGNATURE SIGNATURE SIGNATURE SOPPORTURE TO PRICE IS \$61.25 9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Addison Department of State Florida Depart	325 EXEC CENTER DRIVE #A-104			Stre	Street Address (P.O. Box Number is Not Acceptable)					
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SIGNATURE Signature Signa							_ 		<u></u>	
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FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Trust Fund Contribution. 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE D JORDAN, JOAN 325 EXEC CENTER DRIVE #A-104 WEST PALM BEACH FL 33401 D Belete NAME STREET ADDRESS CITY-ST-2IP WEST PALM BEACH FL 33401 D D D D Delete NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS CITY-ST-2IP TITLE NAME STRE	SIGNATURE.	Signature, typed or printed name of registered agent	and title if applicable.	(NOTE: Registered Agent	signature required	d when reinstating)	DATE			
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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 eath; 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:

561-640-8247