

FILED
Apr 04, 2003 8:00 am
Secretary of State

01-24-2003 90080 043 ****61.25

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

1/2

DOCUMENT # N02000006600

1. Entity Name

VENORD INSTITUTE, INC.



Principal Place of Business

1510 EAST COLONIAL DRIVE
SUITE 300
ORLANDO FL 32803

Mailing Address

1510 EAST COLONIAL DRIVE
SUITE 300
ORLANDO FL 32803

2. Principal Place of Business

1000 NORTH ORLANDO AVE

3. Mailing Address

Suite, Apt. #, etc.

Suite C

Suite, Apt. #, etc.

City & State

WINTER PARK FL

City & State

Zip

32789

Country

USA

Zip

Country

6. Name and Address of Current Registered Agent

VENORD, JEAN M

1510 EAST COLONIAL DRIVE
SUITE 300
ORLANDO FL 32803

4. FEI Number

56 2305817

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

☒ CHECK HERE IF MAKING CHANGES

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

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
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
	PTD			
	VENORD, JEAN	1510 E. COLONIAL DR SUITE 300	ORLANDO, FL 32803	
	SVD			
	VENORD, NADIA	1510 COLONIAL DR. SUITE 300	ORLANDO, FL 32803	
	D Jeannette Valentine	1933 1/2 West Smith St	ORL, FL 32804	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition

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 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JEAN VENORD 1-20-03