

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

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

02-21-2003 90152 001 ****61.25

DOCUMENT # N02000009198

1. Entity Name

MOTIVATIONAL LEARNING CENTER, INC.



Principal Place of Business

**535-B SILVER SLIPPER LN
TALLAHASSEE FL 32303**

Mailing Address

**P.O. BOX 180595
TALLAHASSEE FL 32318-0595**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

02-0654652

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI FL 33145**

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	PTD WALKER, WILLIE 535-B SILVER SLIPPER LN TALLAHASSEE FL 32303	☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP TREASUROR WALKER, ANNIE 535-B SILVER SLIPPER LN TALLAHASSEE FL 32303	☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S JACKSON, CONTESSA 535-B SILVER SLIPPER LN TALLAHASSEE FL 32303	☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D WALKER, WILLIE JR 535-B SILVER SLIPPER LN TALLAHASSEE FL 32303	☒ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY - ST - ZIP	CHAIRMAN DAVID MCCALLA 76 VILLAGE GREEN BARDONIA, NY 10954	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DIRECTOR GLEN JOSEPH 6523 S.W. OLD WIRE RD. FT. WHITE, FL 32038	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SECRETARY CENTRA SMITH 15320 S.W. 46TH COURT MIAMI, FL 33027	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DIRECTOR KLOBSMERY, BRYAN 5121 RED FOX RUN TALLAHASSEE, FL 32303	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DIRECTOR BARBARA THOMPSON 1025 N.W. 144 ST MIAMI, FL 33168	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ 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: Willie Walker

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/16/03 (850) 224-6150

Date

Daytime Phone #

CR2E037 (10/02)