

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

FILED
Apr 03, 2003 8:00 am
Secretary of State

04-03-2003 90159 021 ****70.00

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1. Entity Name

COMMUNITY ALLIANCE FOR EDUCATION, INC.



Principal Place of Business

1013 MONTANA STREET
ORLANDO FL 32803

Mailing Address

1013 MONTANA STREET
ORLANDO FL 32803

2. Principal Place of Business

1013 Montana Street

Suite, Apt. #, etc.

3. Mailing Address

1013 Montana Street

Suite, Apt. #, etc.

City & State

Orlando, FL

City & State

Orlando, FL

Zip

32803

Country

USA

Zip

32803

Country

USA

4. FEI Number

Pending

☒ Applied For

☐ Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

BAZZI, RAY
1013 MONTANA STREET
ORLANDO FL 32803

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

3/24/03

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 PD
NAME BAZZI, RAY
STREET ADDRESS 1013 MONTANA STREET
CITY-ST-ZIP ORLANDO FL 32803 ☐ Delete

TITLE VD
NAME ADAMS, CAROL
STREET ADDRESS 2310 ASHINGTON PARK DRIVE
CITY-ST-ZIP APOPKA FL 32703 ☐ Delete

TITLE SD
NAME ROACH, RICK
STREET ADDRESS 1013 MONTANA STREET
CITY-ST-ZIP ORLANDO FL 32803 ☒ Delete

TITLE TD
NAME SIMMONS, MARILYN
STREET ADDRESS 7359 LAKE UNDERHILL RD.
CITY-ST-ZIP ORLANDO FL 32822 ☐ 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 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE SD
NAME King, Emily
STREET ADDRESS 1013 Montana Street
CITY-ST-ZIP Orlando, FL 32803 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VD
NAME Goss, Joe
STREET ADDRESS 2595 Taft-Vineland Road
CITY-ST-ZIP Orlando, FL 32837 ☐ 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:

Ray Bazzi
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/24/2002
Date

(407) 228-447
Daytime Phone