2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N22071

Jan 09, 2002 8:00 AM Secretary of State

Entity Name: SPACE COAST EARLY INTERVENTION CENTER, INC.

Current Principal Place of Business: New Principal Place of Business:

3661 S. BABCOCK ST.

STE D

MELBOURNE, FL 32901

New Mailing Address: Current Mailing Address:

3661 S. BABCOCK ST.

STE D

MELBOURNE, FL 32901 US

FEI Number: 59-2858471 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FARMER, BETTINA 1490 DOWD CT SE

PALM BAY, FL 32909 US

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:

Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete FARMER, BETTINA D., FARMER, BETTINA D., Name: Name: 1490 DOWD CT. S.E. Address: 1490 DOWD CT. S.E. Address:

City-St-Zip: PALM BAY, FL City-St-Zip: PALM BAY, FL 32909 BR

Title: Title: (X) Change () Addition () Delete Name:

TORPEY, JIM Name: LILLY, CRETCHEN Address: 190 PINELLAS LANE #509 Address: 2525 WILDWOOD City-St-Zip: COCOA BEACH, FL 32931 City-St-Zip: MELBOURNE, FL 32935 BR

Title: () Delete Title: (X) Change () Addition WHITTAKER, KEN DEWIGHT, JAMES Name: Name:

670 ROSSMORE CIRCLE FLORIDA AIR ACADEMY 1950 S ACADEMY DR. Address: Address:

City-St-Zip: MELBOURNE, FL 32940 City-St-Zip: MELBOURNE, FL 32901 BR

Title: () Delete Title: (X) Change () Addition

NASH, CHARLIE Name: Name: HALLEY, LEIGH

930 S. HARBOR CITY BLVD. SUITE 505 148 LANTERNBACK ISLAND DRIVE Address: Address: City-St-Zip: MELBOURNE, FL 32901 City-St-Zip: SATELLITE BEACH, FL 32937 BR

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GRETCHEN LILLY CHAL 01/09/2002