2004 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # N44999

1. Entity Name
THE GIFT OF LEARNING FOUNDATION, INC.

FILED
04 NOV 30 AM 11:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
1698 HIBISCUS AVE WINTER PARK, FL 32789 US	1698 HIBISCUS AVE WINTER PARK, FL 32789 US

11162004 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
1877 W. Oak Ridge Rd.	1877 W. Oak Ridge Rd.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Orlando, FL	City & State: Orlando, FL
Zip: 32809 Country: Orange	Zip: 32809 Country: Orange

4. FEI Number 59-3085393 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

LYMAN, NIEVES
1698 HIBISCUS AVE
WINTER PARK, FL 32789

7. Name and Address of New Registered Agent

Name: Dennis M. Cox, Sr.
Street Address (P.O. Box Number is Not Acceptable): 1877 W. Oak Ridge Rd.
City: Orlando, FL **FL** Zip Code: 32809

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: _____ Dennis M. Cox, Sr. 11-16-04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Amended AR 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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT KITE, GREGORY F 1267 WATERMITCH COVE CIRCLE ORLANDO, FL 32806	☐ Delete	PD Jennifer L. Kite 1877 W. Oak Ridge Rd. Orlando, FL 32809	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD LYMON, NIEVES A 1698 HIBISCUS AVE WINTER PARK, FL 32789	☒ Delete	VPD Gregory F. Kite 1877 W. Oak Ridge Rd. Orlando, FL 32809	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS CONNERY, MENTE 832 N. AMELIA AVE ORLANDO, FL 32801	☒ Delete	VPD Christina D. James 1877 W. Oak Ridge Rd. Orlando, FL 32809	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	T Gregory F. Kite 1877 W. Oak Ridge Rd. Orlando, FL 32809	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	S Alice P. Cox 1877 W. Oak Ridge Rd. Orlando, FL 32809	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	100043065681 11/30/04--01038--019 **70.00	☐ 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: _____ Gregory F. Kite 11-16-04 407-816-2040
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #