2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 11, 2002 8:00 am
Secretary of State
03-11-2002 90016 042 ****61.25

DOCUMENT # N45925

1. Entity Name

SINGLE MOTHERS IN A LEARNING ENVIRONMENT, INC.

Principal Place of Business	Mailing Address
54 E MAIN ST APOPKA FL 32703-5256 US	52 EAST MAIN STREET APOPKA FL 32703-5256

DO NOT WRITE IN THIS SPACE

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 59-3118405 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
SIMS, DEBORAH 54 EAST MAIN STREET APOPKA FL	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.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP ROLLINS, CYNTHIA 1777 SADDLEBACK RIDGE APOPKA FL 32703	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP Bertha Kovalski 3635 Palm Ave. Apopka, Fl. 32712	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DVP COLLIER, ROSE M 8945 N. LAKE ORL. PKWY ORLANDO FL 32808	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DVP Cynthia Thornton 103 W 8th Ave. Apopka, Fl. 32703	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS MCQARVIN, GLORIA 473 PLYMOUTH ROCK PL. APOPKA FL 32703	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS Mary Nixon 189 Durham Pl. Unit 101 Longwood, Fl. 32779	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LEE, LINDA 24 E 15TH STREET APOPKA FL 32703	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Velda Morris 9502 Bon Air Dr. Orlando, Fl. 32818	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MCNEIL, M. P.O. BOX 4013 APOPKA FL 32704-4013	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Marsha Neal 1192 Hermit Smith Rd P.O. Box 150 Plymouth, Fl. 32768	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WOODSON, MYLITZA 2905 BERMUDA AVE S APOPKA FL 32703	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/01)

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: Rebecca Smith / Rebecca Smith 1/29/02 407-889-2946
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #