

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N93000002079

1. Entity Name

CHILDREN'S EDUCATIONAL OPPORTUNITY FOUNDATION, I

now known as: Children First - Central Florida, Inc.

Principal Place of Business

Mailing Address

1101 N. LAKE DESTINY RD.  
SUITE 225  
MAITLAND FL 32751

1101 N. LAKE DESTINY RD.  
SUITE 225  
MAITLAND FL 32751-7105

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

4. FEI Number

59-3169821

Applied For  
Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

1/19/00

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  
Department of State

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
C  
NOGA, GEORGE  
1101 N LAKE DESTINY RD., STE 225  
MAITLAND FL 32751

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
DOUDNEY, DOUGLAS  
1443 BUCKWOOD DR  
ORLANDO FL 32806

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
C  
LAHEY, JOHN  
615 CRESENT EXEC COURT STE 300  
LAKE MARY FL 32795-8421

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
MITCHELL, JOHN C  
2699 LEE RD., SUITE 405  
ORLANDO FL 32789

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
MILLER, WILLIAM  
114 LIVE OAK BLVD  
CASSELBERRY FL 32718-0899

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
SANDERLIN, FRANK  
1051 WINDERLY PL., STE 100  
MAITLAND FL 32751

☐ 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  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
Lahey, John  
Insurance Company of America  
350 N. Westmonte Dr.  
Altamonte Springs, FL 32714  
☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
C  
Mitchell, John C.  
2699 Lee Rd., Ste 405  
Winter Park, FL 32789  
☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ 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:

SIGNATURE REQUIRED  
George Noga

1/19/00

(407) 875-0075

Date

Daytime Phone #

FILED  
Jan 29, 2000 8:00 am  
Secretary of State

01-29-2000 90055 001 \*\*\*61.25

4478



DO NOT WRITE IN THIS SPACE