

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N93000003673

1. Entity Name

GREATER READING OR WRITING SKILLS LITERACY COUNCIL, INC.

Principal Place of Business

Mailing Address

52 EAST MAIN STREET  
APOPKA FL 32703  
US

52 EAST MAIN STREET  
APOPKA FL 32703  
US

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

59-3200028

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

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

SEHLMAYER, CY  
3435 BUTTON BUSH DRIVE  
ZELLWOOD FL 32798

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)

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
P  
GILMORE, ANITA  
218 LIVE OAK LANE  
ALTAMONTE SPRINGS FL 32714 ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DS  
OROSCH, ROSEMARY  
3854 N. LAKE ORLANDO PKWY  
ORLANDO FL 32808 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DS  
Vicky Di Pasquale  
546 W. Kelly Clark Rd.  
Apopka, FL 32712 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
WALT GILMORE  
218 LIVE OAK LN  
ALTAMONTE SPRGS FL 32714 ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
T  
WOLFE, MELBA  
P O BOX 916477  
LONGWOOD FL 32791 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VP  
Derry Sampey  
1515 Skye Ct.  
Apopka, FL 32703 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VP  
MCCORD, MARION  
1548 STORMWAY CT  
APOPKA FL 32712 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
Pat Melley  
2323 Fieldingwood  
Haitland, FL 32751 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
WASSERMAN, LAURIE  
1268 INDIAN BLUFF DR  
APOPKA FL 32703 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Treasurer  
Laurie Wasserman ☒ 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:

*Laurie Wasserman* REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-14-02

Date

Daytime Phone #

FILED  
Apr 10, 2002 8:00 am  
Secretary of State

03-11-2002 90056 028 \*\*\*\*70.00



DO NOT WRITE IN THIS SPACE

CR2E037 (9/01)