

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N95000003861

1. Entity Name

MORNINGSTAR LEARNING CENTER INC.

Principal Place of Business

8200 BEE RIDGE RD  
SARASOTA FL 34241

Mailing Address

P O BOX 5502  
SARASOTA FL 34277-5502

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 59-3376870

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

DITCHFIELD, STANLEY

~~7173 W COUNTRY CLUB DR N~~ 3569 Saulstars Court  
~~APT 141~~ Sarasota, FL 34232  
~~SARASOTA FL 34243~~

Name

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

3569 Saulstars Court

City

Sarasota

FL

Zip Code

34232

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 PD  
NAME JACQUELIN D. HOLLAND  
STREET ADDRESS 2825 PINECREST ST  
CITY-ST-ZIP SARASOTA FL ☐ Delete

TITLE M/D/S  
NAME MAXIMILLIAN M. MAYERHOFER  
STREET ADDRESS 3568 SAULSTARS COURT  
CITY-ST-ZIP SARASOTA, FL 34232 ☐ Change ☒ Addition

TITLE V/D/D  
NAME STANLEY DITCHFIELD  
STREET ADDRESS 7173 W COUNTRY CLUB DR N APT 141  
CITY-ST-ZIP SARASOTA FL 34243 ☐ Delete

TITLE V/D/T  
NAME STANLEY DITCHFIELD  
STREET ADDRESS 3569 SAULSTARS COURT  
CITY-ST-ZIP SARASOTA, FL 34232 ☒ Change ☐ Addition

TITLE DS  
NAME JOAN DITCHFIELD  
STREET ADDRESS 7173 W COUNTRY CLUB DR N  
CITY-ST-ZIP SARASOTA FL 34243 ☐ Delete

TITLE D  
NAME JOAN DITCHFIELD  
STREET ADDRESS 3569 SAULSTARS COURT  
CITY-ST-ZIP SARASOTA, FL 34232 ☒ Change ☐ Addition

TITLE D  
NAME GIANCOLI, WENDY  
STREET ADDRESS 1616 ADAMS DR W  
CITY-ST-ZIP SUFFOLK VA 23433 ☐ Delete

TITLE D  
NAME DEBORAH R. MEACHAM  
STREET ADDRESS 3569 SAULSTARS COURT  
CITY-ST-ZIP SARASOTA, FL 34232 ☐ Change ☒ Addition

TITLE D  
NAME KUTINSKY, DONNA  
STREET ADDRESS 1121 HONORE AVE  
CITY-ST-ZIP SARASOTA FL 34232 ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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)(l), 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:

*Stanley Ditchfield*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

STANLEY DITCHFIELD Feb 5/02 944 3764844  
Date Daytime Phone #



DO NOT WRITE IN THIS SPACE

CR2E037 (9/01)