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Jan 23, 1999 8:00am
Secretary of State

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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N95000005386

1. Corporation Name

STANDING PROUD CONDUCTIVE LEARNING CENTER, INC.

Principal Place of Business
11765 MANDARIN RD.
JACKSONVILLE FL 32223-1334

Mailing Address
11765 MANDARIN RD.
JACKSONVILLE FL 32223-1334



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified

11/13/1995

4. FEI Number

59-3341992

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution



\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

WALTHOUR-EASTON, DEBRA
11765 MANDARIN RD.
JACKSONVILLE FL 32223-1334

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME WALTHOUR-ESTON, DEBRA
STREET ADDRESS 11765 MANDARIN RD.
CITY-ST-ZIP JACKSONVILLE FL 32223-1334

☐ DELETE

TITLE VPD
NAME EASTON, SCOTT ERWIN
STREET ADDRESS 11765 MANDARIN RD.
CITY-ST-ZIP JACKSONVILLE FL 32223-1334

☐ DELETE

TITLE S
NAME WALTHOUR-EASTON, DEBRA
STREET ADDRESS 11765 MANDARIN RD.
CITY-ST-ZIP JACKSONVILLE FL 32223-1334

☐ DELETE

TITLE T
NAME EASTON, SCOTT ERWIN
STREET ADDRESS 11765 MANDARIN RD.
CITY-ST-ZIP JACKSONVILLE FL 32223-1334

☐ DELETE

TITLE D
NAME EASTON, JAMES J DR.
STREET ADDRESS 5106 GRIFFIN ST.
CITY-ST-ZIP MOSS POINT MS 39563

☐ DELETE

TITLE D
NAME DAGIN, FAYE
STREET ADDRESS 4805 PHIL ROSE
CITY-ST-ZIP JACKSONVILLE FL 32256

☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

☐ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Debra Walthour-Easton

08 Jan 1999 904 292-9981

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)