FILE NOW: FILING FEE IS \$61.25

Mailing Address

SUITE 230 ORLANDO FL 32808

2a. Mailing Address

1900 SUMMIT TOWERS BLVD.

NONPROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

1900 SUMMIT TOWERS BLVD

2. Principal Place of Business

SUITE 230

ORLANDO FL 32810



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N96000004803 (0)

ACTS II EDUCATIONAL CORPORATION. INC.

\$8.75 Additional 5. Certificate of Status Desired \Box 21 Fee Required Suite, Apt. #, etc. Suite, Apt. #, etc. 6. Election Campaign Financing \$5.00 May Be Added to Fees 22 Trust Fund Contribution 27 City & State City & State 7. Is this nonprofit corporation a homeowners association? Yes No 23 28 Ζıρ Country 8. This corporation owes or has paid the current year Intangible 24 29 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name **BOWERS, CLAUD** Street Address (P.O. Box Number is Not Acceptable) 82 1900 SUMMIT TOWERS BLVD. **SUITE 230** 83 ORLANDO FL 32810 84 City 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) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition PÑ 1.1 TITLE TITLE **BOWERS, CLAUD** 1.2 NAME NAME **477 PICKFORD POINT** STREET ADDRESS 1.3 STREET ADDRESS LONGWOOD FL 32779 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE NAME VARNUM, JEROME 2.2 NAME STREET ADDRESS 8875 E. STATE HWY. 52 2.3 STREET ADDRESS WEBB AL 36376 CITY-ST-ZIP 2. 4 CITY-ST-ZIP STD DELFTE Change Addition TITLE 3.1 TITLE WADDELL, GARY 3.2 NAME NAME **823 APPLE TREE STREET** 3.3 STREET ADDRESS STREET ADDRESS DOTHAN AL 36301 3.4 CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change ☐ Addition NAME 4 2 NAME STREET ADDRESS 4 3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME

14. Thereby 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 suppliemental 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 composition or the received to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 13 if chapted in given a requirement of the composition of the received to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 13 if chapted in given a requirement of the composition of the received to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 13 if chapted in given a requirement of the composition of the received to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 13 if chapted in given a requirement of the composition of the received to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 13 if chapted in given a requirement of the composition of the received to execute this report as required by Chapter 617, Florida Statutes.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY - ST- ZIP

5.4 CITY-ST-ZIP

61 THE

6.2 NAME

DELETE

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

1-9-98

407-875-9095

Change

___ Addition

FILED

Feb 18 1998 8:00am

Secretary of State

Applied For

Not Applicable

3. Date Incorporated or Qualified

APPLIED FOR

09/18/1996 4. FEI Number 59-3429960