2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N98000000203

FILED Apr 26, 2003 Secretary of State

Entity Name: HERNANDO EDUCATION AND ARTS PARTNERSHIP, INC.

Current Principal Place of Business: New Principal Place of Business: 12214 MAGNOLIA GROVE LANE 38 PINEWOOD CIRCLE BAYONET POINT, FL 34667 SAFETY HARBOR, FL 34695 US **Current Mailing Address: New Mailing Address:** 12214 MAGNOLIA GROVE LANE 38 PINEWOOD CIRCLE BAYONET POINT, FL 34667 SAFETY HARBOR, FL 34695 US FEI Number: 59-3489827 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of New Registered Agent: Name and Address of Current Registered Agent: SEYFERTH, RAY SEYFERTH, RAY 38 PINEWOOD CIRCLE 12214 MAGNOLIA GROVE LANE HUDSON, FL 34667 SAFETY HARBOR, FL 34695 US 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: 04/26/2003 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition DEANGELIS, CHRISTOPHER Name: Name: 11113 NORRELL RD Address: Address: City-St-Zip: SPRING HILL, FL 34608 City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: SEYFERTH, THELMA Name: SEYFERTH, THELMA Address: 12214 MAGNOLIA GROVE LANE Address: 38 PINEWOOD CIRCLE City-St-Zip: BAYONET POINT, FL 34667 City-St-Zip: SAFETY HARBOR, FL 34695 US Title: () Delete Title: (X) Change () Addition SEYFERTH, RAY Name: SEYFERTH, RAY Name: 12214 MAGNOLIA GROVE LANE 38 PINEWOOD CIRCLE Address: Address: City-St-Zip: BAYONET POINT, FL 34667 City-St-Zip: SAFETY HARBOR, FL 34695

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THELMA SEYFERTH PTD 04/26/2003