

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 90728 024 ****61.25

DOCUMENT # **N98000004756**



1. Entity Name
REALIZED POTENTIAL TRAINING INSTITUTE, INC.

Principal Place of Business
**6077 FIFTH AVE NORTH
ST PETERSBURG FL 33710**

Mailing Address
**PO BOX 13601
ST PETERSBURG FL 33710
US** **33733**

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State

Zip Country Zip Country

4. FEI Number **59-3456132** Applied For
Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**OVERTON, DIANE
6077 FIFTH AVE NORTH
ST PETERSBURG FL 33710**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *[Signature]* **DIANE OVERTON** **April 30, 03**
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
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D <input type="checkbox"/> Delete
NAME	OVERTON, DIANE
STREET ADDRESS	6077 FIFTH AVE NORTH
CITY-ST-ZIP	ST PETERSBURG FL 33710
TITLE	D <input type="checkbox"/> Delete
NAME	JONES, ROY E
STREET ADDRESS	1220 N STATE PARKWAY
CITY-ST-ZIP	CHICAGO IL 60610
TITLE	D <input type="checkbox"/> Delete
NAME	FICSHER, JEANETTE
STREET ADDRESS	3700 40TH AVE N
CITY-ST-ZIP	ST PETERSBURG FL 33714
TITLE	TS <input type="checkbox"/> Delete
NAME	SWAIN, DANA
STREET ADDRESS	675 62ND AVENUE SO
CITY-ST-ZIP	SAINT PETERSBURG FL 33705
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
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CITY-ST-ZIP	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS	
CITY-ST-ZIP	

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: *[Signature]* **DIANE OVERTON** **April 30, 03**

CR2E037 (10/02)