

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000041646

FILED
Apr 30, 2003
Secretary of State

Entity Name: READING AND MATH SUMMER CAMP, INC.

Current Principal Place of Business:

5933 CRYSTAL VIEW DRIVE
ORLANDO, FL 32819

New Principal Place of Business:

6803 SPRING RAIN DRIVE
ORLANDO, FL 32819

Current Mailing Address:

5933 CRYSTAL VIEW DRIVE
ORLANDO, FL 32819

New Mailing Address:

6803 SPRING RAIN DRIVE
ORLANDO, FL 32819

FEI Number: 59-3641927

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SULLIVAN, DENISE
5933 CRYSTAL VIEW DRIVE
ORLANDO, FL 32819

Name and Address of New Registered Agent:

TALIAFERRO, DIANE
6803 SPRING RAIN DRIVE
ORLANDO, FL 32819

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: DIANE W. TALIAFERRO

04/30/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DT () Delete
Name: JOHNSON, PATTI
Address: 8541 CEDAR COVE DRIVE
City-St-Zip: ORLANDO, FL 32819

Title: PD () Delete
Name: SULLIVAN, DENISE
Address: 5933 CRYSTAL VIEW
City-St-Zip: ORLANDO, FL 32819

Title: SD () Delete
Name: CONNELL, BILL
Address: 6909 DR. PHILLIPS BLVD
City-St-Zip: ORLANDO, FL 32819

Title: VPD () Delete
Name: TALIAFERRO, DIANE
Address: 6808 SPRING ROBIN DR
City-St-Zip: ORLANDO, FL 32319

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change () Addition
Name: SULLIVAN, DENISE
Address: 5933 CRYSTAL VIEW
City-St-Zip: ORLANDO, FL 32819

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change () Addition
Name: TALIAFERRO, DIANE
Address: 6808 SPRING RAIN DR
City-St-Zip: ORLANDO, FL 32319

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DIANE W. TALIAFERRO

PD

04/30/2003

Electronic Signature of Signing Officer or Director

Date