2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000061887

Entity Name: SCHOOL IMAGES, INC

FILED May 01, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business: 6331 39 STREET UNIT 140 6331 39 STREET N PINELLAS PARK, FL 33781 #140 PINELLAS PARK, FL 33781 **Current Mailing Address: New Mailing Address:** 6331 39 STREET UNIT 140 PO BOX 3260 PINELLAS PARK, FL 33781 SEMINOLE, FL 33775 **FEI Number:** FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DASSETT, DIANE C DASSETT, DIANE C Q331 39 STREET UNIT 140 6331 39 STREET US PINELLAS PARK, FL 33781 #140 PINELLAS PARK, FL 33781 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: 05/01/2002 Electronic Signature of Registered Agent Date This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition DASSETT, DIANE C Name: Name: DASSETT, DIANE C 6331 39 STREET UNIT 140 6331 39 STREET UNIT 140 Address: Address: City-St-Zip: PINELLAS PARK, FL 33781 City-St-Zip: PINELLAS PARK, FL 33781 () Delete Title: () Change (X) Addition Title: WOLF, STEVEN C Name: Name: Address: Address: PO BOX 3260 City-St-Zip: City-St-Zip: SEMINOLE, FL 33775 () Delete Title: Title: DIR () Change (X) Addition WOLF, STEVEN C Name: Name: PO BOX 3260 Address Address: City-St-Zip: City-St-Zip: SEMINOLE, FL 33775 Title: () Delete Title: **PRES** () Change (X) Addition WOLF, STEVEN C Name: Name: Address: Address: PO BOX 3260 City-St-Zip: City-St-Zip: SEMINOLE, FL 33775 Title: Title: () Change (X) Addition () Delete WOLF, STEVEN C Name: Name: Address: PO BOX 3260 Address: City-St-Zip: City-St-Zip: SEMINOLE, FL 33775 Title: () Delete Title: **TRES** () Change (X) Addition Name: Name: WOLF, STEVEN C Address: Address: PO BOX 3260 City-St-Zip: City-St-Zip: SEMINOLE, FL 33775

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: STEVEN WOLF PRES 05/01/2002