

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000004034

Entity Name: NGMJ LEARNING, INC.

FILED
Apr 30, 2003
Secretary of State

Current Principal Place of Business:

5261 TROPICAL POINT
WEEKI WACHEE, FL 34607

New Principal Place of Business:

11136 LIBBY ROAD
SPRING HILL, FL 34609

Current Mailing Address:

5261 TROPICAL POINT
WEEKI WACHEE, FL 34607

New Mailing Address:

11136 LIBBY ROAD
SPRING HILL, FL 34609

FEI Number: 01-0592478

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLER, NICOLE
5261 TROPICAL POINT
WEEKI WACHEE, FL 34607

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MILLER, NICOLE
Address: 5261 TROPICAL POINT
City-St-Zip: WEEKI WACHEE, FL 34607

Title: D () Delete
Name: MILLER, GLENN T JR.
Address: 5261 TROPICAL POINT
City-St-Zip: WEEKI WACHEE, FL 34607

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: NICOLE MILLER

D

04/30/2003

Electronic Signature of Signing Officer or Director

Date