

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P35722

FILED
Mar 21, 2003
Secretary of State

Entity Name: COMMUNITY VOCATIONAL SCHOOLS OF JACKSONVILLE, INC.

Current Principal Place of Business:

8386 BAYMEADOWS, SUITE 4
JACKSONVILLE, FL 32256

New Principal Place of Business:

Current Mailing Address:

648 TRADE CENTER BLVD
CHESTERFIELD, MO 63005

New Mailing Address:

FEI Number: 36-3787383 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROTH, PAULETTE S
8380 BAYMEADOWS RD.
STE. 14
JACKSONVILLE, FL 32256 US

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: P () Delete
Name: GANS, JAMES
Address: 12747 OLIVE BLVD., SUITE 214
City-St-Zip: ST. LOUIS, MO 631416269

Title: VP () Delete
Name: GANS, RICHARD
Address: 12747 OLIVE BLVD., SUITE 214
City-St-Zip: ST. LOUIS, MO 631416269

Title: S () Delete
Name: PRITCHETT, CAROL M.,
Address: 12747 OLIVE BLVD. SUITE 214
City-St-Zip: ST LOUIS, MO 631416269

Title: T () Delete
Name: ROTHSTEIN, MARK I
Address: 12747 OLIVE BLVD. SUITE 214
City-St-Zip: ST. LOUIS, MO 631416269

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: MARK I. ROTHSTEIN

Electronic Signature of Signing Officer or Director

TREA

03/21/2003

_____ Date