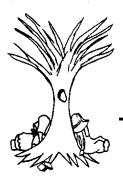
| | MENT # P930 0 | | | | Marion Parts. | Į. | U . | į | | | |
|---|---|---|-----------------------|--------------------------|--------------------|--|--|------------------------|-------------|-----------------------------|--------------|
| 1. Entity Name THE LEARNING TREE DEVELOPMENTAL LEARNING CENTER, | | | | | | FILED | | | | | |
| Principal Plac | on of Punione | Mailing Address | | | | | 02 JAN -7 | AM 10: | 49 | | |
| Principal Place of Business 207 EMERSON DR NW PALM BAY FL 32907 | | 203 ELM AVE | • | | | SCURE FARY OF STATE TATLAHASSEELFLORIDA | | | | | |
| | | | | | | | | | | | |
| · | | 3. Mailing Address | | | | | ~^ | . \ |) () |) | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | | U TO OT RITE IN THE | | | | | |
| City & State | | City & State | City & State | | | FEI Number | 59-3 198569 | | No | aplied For ot Applicable | |
| Zip | Country | Zip | Cour | itry | 5. | Certificate of | Status Desired | | .75 Add | |)_ |
| | 6. Name and Address of Current | t Registered Agent | | Name | 7. | Name and A | ddress of New Re | gistered Age | nt | | 7 |
| WHELPLE 203 ELM | Y, PRISCILLA | | | | | -Box-Number- | is-Not-Accoptable |) | | | - |
| | RNE BEACH FL 32951 | | | | | | | | | | 1 |
| | | | | | | FL Zip | | | | e | 1 |
| Tax filing | Signature, typed or printed name of registered agent oration is eligible to satisfy its Intangible requirement and elects to do so. ria on back) | | !!! FEE 2, 2001 | IS \$550.0 Fee will b | e \$750.00 | 10. Elect | ion Campaign Fina Fund Contribution | | | 00 May Be | |
| 11. | OFFICERS AND | | 12. | | A | | HANGES TO OFFI | CERS AND DI | RECTOR | | 1_ |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PTD WHELPLEY, PRISCILLA A 203 ELM AVENUE MELBOURNE BEACH FL | ☐ Delete | | | 5000 203 mel | in W Elm Bourn | helpley Ave Beach, | (50n) | Change | Addition | DE024 (E/04) |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | ☐ Celete ~ | | | | | | | Change | ☐ Addition | 9 |
| TITLE NAME Street address City_st=zip | | ☐ Delete | | | - | 1 | 00004 -01/22 ***** | 7855 /0201 08.75 | 020 **** | Addise -012 308.75 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | ☐ Delete | | | | | | | Change | Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | ☐ Delete | | | | | | | Change | Addition . | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | ☐ Delete · | | | | | | | Change | ☐ Addition | |
| indicated of the cor | certify that the information supplied with on this report of supplemental report is poration or the receiver or trustee emp , or on an attachment with an address, | s true and accurate and that r owered to execute this report | ny signat as requi | ture shall ha | ave the same | e legal effect a | is if made under oa | ath: that I am a | an officer | or director | |

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date



The Learning Tree

207 Emerson Drive, NW • Palm Bay, Florida 32907 (407) 951-3868

Dear Sir/Madam,

I am writing this letter to request waiver of late fees to reinstate this corporation. In the spring of 2001 my husband and I separated and he requested a change of address for the mail. This change of address caused many problems with the delivery of both personal and business mail for many months. I was not aware of the time frame or need for filing a reinstatement for a corporation each year, therefore, I was not watching the mail for this document. I did not receive a document package until October 2001. When I did receive the form in October, I sent it out with the amount I thought was needed for this. It was returned to me with a request for additional fees.

After speaking with one of your agents on the phone, it was suggested that I send this letter along with a check for \$300.00. I am hopeful that this will be accepted by your office and reinstatement granted for The Learning Tree Developmental Learning Center. I now have full control of the corporation and in the future will file all documents in a timely manner.

Sincerely,

Priscilla A. Whelpley