

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.**  
**AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)**

**PROFIT CORPORATION ANNUAL REPORT 1995**



FLORIDA DEPARTMENT OF STATE  
 Sandra B. Mortham  
 Secretary of State  
 DIVISION OF CORPORATIONS

**FILED SECRETARY OF STATE DIVISION OF CORPORATIONS**

95 JUN 29 AM 8:24

**DOCUMENT # P93000027916 (4)**

1. Corporation Name  
**ADOPT-A-SCHOOL, INC.**

Principal Place of Business Mailing Address  
**P O BOX 2203 WINTER PARK FL 32790 P O BOX 2203 WINTER PARK FL 32790**

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21. Suite, Apt. #, etc.		26. Suite, Apt. #, etc.		04/14/1993	05/24/1994
22. City & State		27. City & State		4. FEI Number	Applied For
23. Zip		28. Zip		59-3176691	Not Applicable
24. Country		29. Country		5. Certificate of Status Desired	\$8.75 Additional Fee Required
25. Country		30. Country		<input type="checkbox"/>	\$5.00 May Be Added to Fees
				6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/>
				7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

8. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
DUCHEMIN, ROBERT A 201 S ORANGE AVE SUITE 1015 ORLANDO FL 32801				81. Name	AL FRITH		
				82. Street Address (P.O. Box Number is Not Acceptable)	28 EAST WASHINGTON ST.		
				83. City	ORLANDO		
				84. State	FL	85. Zip Code	32802

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and I accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *[Signature]* DATE: 6-23-95

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	DP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COLEMAN, JERRY V	1.2 NAME	COLEMAN, JERRY V
STREET ADDRESS	1572 SUNSET DR	1.3 STREET ADDRESS	2352 SUN VALLEY CIRCLE
CITY - ST - ZIP	WINTER PARK FL	1.4 CITY - ST - ZIP	WINTER PARK, FL 32792
TITLE	DVTS	2.1 TITLE	DVTS <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GONZALEZ, GERRY T	2.2 NAME	GONZALEZ, GERRY C
STREET ADDRESS	3505 TARPON WOODS BLVD #405	2.3 STREET ADDRESS	1500 SUNSET RD. #86
CITY - ST - ZIP	PALM HARBOR FL	2.4 CITY - ST - ZIP	TARPON SPRINGS, FL 34689
TITLE		3.1 TITLE	DVTS <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		3.2 NAME	JAMES T. COLEMAN
STREET ADDRESS		3.3 STREET ADDRESS	12000 4TH ST. NORTH #911
CITY - ST - ZIP		3.4 CITY - ST - ZIP	ST. PETERS BULO, FL 33716
TITLE		4.1 TITLE	DIRECTOR <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		4.2 NAME	ALFRED C FRITH
STREET ADDRESS		4.3 STREET ADDRESS	28 EAST WASHINGTON ST.
CITY - ST - ZIP		4.4 CITY - ST - ZIP	ORLANDO, FL 32802
TITLE		5.1 TITLE	DIRECTOR <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		5.2 NAME	RODERICK B. PRICE
STREET ADDRESS		5.3 STREET ADDRESS	4629 36th ST. SUITE 100
CITY - ST - ZIP		5.4 CITY - ST - ZIP	ORLANDO, FL 32811
TITLE		6.1 TITLE	DIRECTOR <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		6.2 NAME	FRANK L. PRICE
STREET ADDRESS		6.3 STREET ADDRESS	6064 So. APOPLICA-VINELAND RD. STE 5.
CITY - ST - ZIP		6.4 CITY - ST - ZIP	ORLANDO, FL 32819

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(5)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* *[Signature]* 6/22/95 407614-7583