## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 19 1998 8:00am

Secretary of State

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Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000037785 (1)

ADVANCED TRAFFIC EDUCATION INC.

Principal Plac	e of Business	Mailing Address	·····-		
4001 NEWBERRY RD SUITE D4 GAINESVILLE FL \$2607		4001 NEWBERRY RD SUITE D4 GAINESVILLE FL 328	70	DO NOT WRITE IN THIS SPACE	
			•	3. Date Incorporated or Qualified	
				05/24/1993	
	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt.	# atc	Suite, Apt #, etc.		59-3188392	Not Applicable
22	#, B(C.	F1		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	<del></del>	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the cu	
24	25	29	30		☑ Yes ☐ No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registere					Agent
PALLONE, EVE					
1708 NW 22ND TERRACE 340 NE 15t Avenue 82 Street Address GAINESVILLE FL 32005 Williston, F1, 32696				Address (P.O. Box Munaber is Not Acceptable)	
G/A	INCOVILLE FL 32005	Jillistan, Pl. O	2676 3	40 NE 1 # TR.	
			83		
			84 City /	Uilliston FL	85 Zin Code
15 Durayant	to the provisions of Continue CO7.	05/02 and 007 15/09 Clasida O		· · · · · ·	10694
office or r	egi <b>ste</b> red agent or both, in the St	aste of Florida. Such cha <b>nge w</b>	atutes, the above-hamed as authorized by the cor	d corporation submits this statement for the purpose of poration's board of directors. I hereby accept the appropriation's	r changing its registered   pointment as registered
agent. La	m familiar with, and accept the of	oligations of, Section 607,0505	, Florida Statutes		
SIGNATURE	Signature, typed or printed name of respective	Laused and talent auplicable	NOTE: Rog-stored Agent signatur	e required when reinstating) DATE	
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS ANI	D DIRECTORS IN 12
TITLE	PS	DELETE	1.1 TITLE		Change Addition
NAME	<b>SIE</b> GER, BARBARA G.		1.2 NAME		
STREET ADDRESS	2340 NW 59TH TERRACE	3 · • •	13 STREET ADDRESS		
CITY-ST-ZIP		2606	1.4 CITY-ST-ZIP		
TITLE	PT	☐ DELFTE	2.1 TITLE	St A	Change
NAME	PALLONE, EVE		2.2 NAME	240 NE 1 AUCH	we
STREET ADDRESS	1708 11W-22ND TERRACE	LOTALL FIA	2.3 STREET ADDRESS	370 rts 2 El 201	91.
CfTY+ST-ZIP	-GAINESVILLE-FL WIL	MOION LA	2 4 CITY - ST - ZIP	340 NE 1 <sup>St</sup> Awn	υ <b>/ Φ</b>
TITLE		L_3 IJELETE	3.1 TITLE		Change Addition
NAME Street address			3.2 NAME		
CITY-ST-ZIP			3.3 STREET ADDRESS		
TITLE		DELETE	3.4. CITY - ST - ZIP 4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		C C C C C C C C C C C C C C C C C C C
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CHY-SI-ZIP		
TITLE		DELETE	51 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		- —
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			E 3 CTREET ADDRESS		

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 compowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attainment with an address.