

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 02, 2003 8:00 am**  
**Secretary of State**

04-02-2003 90386 016 \*\*\*150.00

**DOCUMENT # P94000001858**

**1. Entity Name**  
**EDUTEK EDUCATION SOLUTIONS, INC.**



**Principal Place of Business**

**3499 NW 97TH BLVD**

**11**

**GAINESVILLE FL 32606**

**US**

**Mailing Address**

**3499 NW 97TH BLVD**

**11**

**GAINESVILLE FL 32606**

**US**

**2. Principal Place of Business**

**170 Towne Lake Pkwy.**

**Suite, Apt. #, etc.**

**3. Mailing Address**

**170 Towne Lake Pkwy.**

**Suite, Apt. #, etc.**

**City & State**

**Woodstock, GA.**

**Zip**

**30188**

**Country**

**USA**

**City & State**

**Woodstock, GA.**

**Zip**

**30188**

**Country**

**USA**

**4. FEI Number**

**62-1558718**

**Applied For**

**Not Applicable**

**5. Certificate of Status Desired**

☐

**\$8.75 Additional Fee Required**

☒ **CHECK HERE IF MAKING CHANGES**

**6. Name and Address of Current Registered Agent**

**SLAUGHTER, HARRY O**

**3499 NW 97TH BLVD**

**STE 11**

**GAINESVILLE FL 32606**

**7. Name and Address of New Registered Agent**

**Name**

**Anthony SALZMAN**

**Street Address (P.O. Box Number is Not Acceptable)**

**500 E Univ. Ave.**

**Ste A**

**City**

**Gainesville**

**FL**

**Zip Code**

**32601**

**8. 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. I am familiar with, and accept the obligations of registered agent.**

**SIGNATURE**

*Anthony Salzman*

**ANTHONY SALZMAN**

**4/1/03**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2003 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

**9. Election Campaign Financing**  
**Trust Fund Contribution.**

☐

**\$5.00 May Be Added to Fees**

**10. OFFICERS AND DIRECTORS**

**TITLE** **D** ☐ **Delete**

**NAME** **SLAUGHTER, HARRY O**

**STREET ADDRESS** **3499 NW 97TH BLVD, SUITE 11**

**CITY-ST-ZIP** **GAINESVILLE FL**

**TITLE** **D** ☐ **Delete**

**NAME** **SLAUGHTER, PHILIP**

**STREET ADDRESS** **3499 NW 97TH BLVD, STE 11**

**CITY-ST-ZIP** **GAINESVILLE FL**

**TITLE** **D** ☐ **Delete**

**NAME** **SLAUGHTER, LYNNETTE B**

**STREET ADDRESS** **3499 NW 97TH BLVD, STE 11**

**CITY-ST-ZIP** **GAINESVILLE FL**

**TITLE** ☐ **Delete**

**NAME**

**STREET ADDRESS**

**CITY-ST-ZIP**

**TITLE** ☐ **Delete**

**NAME**

**STREET ADDRESS**

**CITY-ST-ZIP**

**TITLE** ☐ **Delete**

**NAME**

**STREET ADDRESS**

**CITY-ST-ZIP**

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

**TITLE** ☒ **Change** ☐ **Addition**

**NAME**

**STREET ADDRESS** **170 TOWNE LAKE PKWY**

**CITY-ST-ZIP** **WOODSTOCK, GA 30188**

**TITLE** ☒ **Change** ☐ **Addition**

**NAME**

**STREET ADDRESS** **170 TOWNE LAKE PKWY**

**CITY-ST-ZIP** **WOODSTOCK, GA 30188**

**TITLE** ☒ **Change** ☐ **Addition**

**NAME**

**STREET ADDRESS** **170 TOWNE LAKE PKWY**

**CITY-ST-ZIP** **WOODSTOCK, GA 30188**

**TITLE** ☐ **Change** ☐ **Addition**

**NAME**

**STREET ADDRESS**

**CITY-ST-ZIP**

**TITLE** ☐ **Change** ☐ **Addition**

**NAME**

**STREET ADDRESS**

**CITY-ST-ZIP**

**12. I hereby 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.**

**SIGNATURE:**

*Lynette B. Slaughter*  
**SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**

**3/26/03**

Date

**770-926-4322**

Daytime Phone #

CR2E034 (10/02)