

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000089973

1. Entity Name

KW COMPUTER TRAINING, INC.

**FILED**  
**Apr 22, 2000 8:00 am**  
**Secretary of State**

04-22-2000 90127 020 \*\*\*150.00

Principal Place of Business

Mailing Address

1042 MAIN ST  
201  
DUNEDIN FL 34698  
US

1042 MAIN ST  
201  
DUNEDIN FL 34698-5236  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3288738

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WORKMAN, JAMES J  
~~13432 ANDOVA DRIVE~~  
~~LARGO FL 34644~~

Name

James J Workman

(New Address)

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

1042 Main Street #201

City

Dunedin

FL

Zip Code

34698

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.

SIGNATURE

*James J. Workman*

James J. Workman

4-10-00

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☐ Delete  
NAME SCOTT G. KELBY  
STREET ADDRESS 711 WILDFLOWER  
CITY-ST-ZIP PALM HARBOR FL 34683

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE V ☐ Delete  
NAME JAMES J. WORKMAN  
STREET ADDRESS 13432 ANDOVA DR.  
CITY-ST-ZIP LARGO FL

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 3020 Ashland Terr  
CITY-ST-ZIP Clearwater FL 33761

TITLE T ☐ Delete  
NAME JEAN A. KENDRA  
STREET ADDRESS 13432 ANDOVA DR.  
CITY-ST-ZIP LARGO FL

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 3020 Ashland Terr  
CITY-ST-ZIP Clearwater FL 33761

TITLE S ☐ Delete  
NAME KALEBRA, KELBY  
STREET ADDRESS 711 WILDFLOWER  
CITY-ST-ZIP PALM HARBOR FL 34683

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Jean A Kendra*

Jean A Kendra

4-10-00

727-733-6225

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #