

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Sep 18, 2002 8:00 am**  
**Secretary of State**

09-18-2002 90056 040 \*\*\*150.00

DOCUMENT # *P95 000010050*  
1. Entity Name

*LIG Educational & Consulting Services, Inc.*

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
*9600 Reger Blvd N*  
Suite, Apt., etc.  
*Suite 225*

3. Mailing Address  
*PO Box 55485*  
Suite, Apt., etc.

DO NOT WRITE IN THIS SPACE

City & State  
*St. Petersburg, FL*

City & State  
*St. Petersburg, FL*

4. FEI Number  
*58-2166181*

Applied For  
Not Applicable

Zip  
*33702*

Country  
*US*

Zip  
*33732-5485*

Country  
*US*

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

**DO NOT WRITE IN THIS SPACE**

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

Name  
*Ian R. Greenway*  
Street Address (P.O. Box Number is Not Acceptable)  
*9600 Reger Blvd N*  
*Suite 225*  
City  
*St. Petersburg* **FL** Zip Code  
*33702*

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 \_\_\_\_\_ (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)

**January 1 - May 1 Fee is \$150.00**  
**After May 1, Fee is \$550.00**  
**Amended UBR is \$61.25**  
**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**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
*President*  
*Ian R. Greenway*  
*9600 Reger Blvd N, Suite 225*  
*St. Petersburg, FL 33702*

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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**DO NOT WRITE IN THIS SPACE**

13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: \_\_\_\_\_ Date: *September 16, 2002* 727-578-2800  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034B (12/01)



Attachment

872911

# P95000010050

September 16, 2002

Department of State  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

Re: Annual Report

To Whom It May Concern:

Pursuant to a phone conversation today with one of your agents, we have found that the mailing address you have on record for LIG Educational & Consulting Services, Inc. is incorrect.

Due to the incorrect address, we never received our UBR for this years filing. As such, per the instruction of your representative, I have enclosed our UBR along with a check in the amount of \$150.00.

If you have any questions, please feel free to contact my assistant, Agira Iljazi @ 727-578-2800 ext. 319.

Thank you in advance for your assistance.

Kind Regards,

A handwritten signature in black ink, appearing to be 'Ian R. Greenway', written over a horizontal line.

Ian R. Greenway  
President

**LIG Educational & Consulting Services, Inc.**

P.O. Box 55485, St. Petersburg, Florida 33732 Tel 727-578-2800 Fax 727-578-9977 www.LIGECES.com