

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P95000026457

FILED  
Apr 14, 2002 8:00 AM  
Secretary of State

**Entity Name:** EMERGENCY EDUCATIONAL CONSULTANTS OF SOUTH FLORIDA, INC.

## Current Principal Place of Business:

7220 NW 39TH MANOR  
CORAL SPRINGS, FL 33065 US

## New Principal Place of Business:

7667 W SAMPLE RD  
#294  
CORAL SPRINGS, FL 33065 US

## Current Mailing Address:

7220 NW 39TH MANOR  
CORAL SPRINGS, FL 33065 US

## New Mailing Address:

7667 W SAMPLE RD  
#294  
CORAL SPRINGS, FL 33065 US

FEI Number: 65-0586871

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SOARD, TODD  
7220 NW 39TH MANOR  
CORAL SPRINGS, FL 33065 US

## Name and Address of New Registered Agent:

SOARD, TODD  
7667 W SAMPLE RD  
#294  
CORAL SPRINGS, FL 33065 US

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: TODD SOARD

04/14/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: SOARD, TODD  
Address: 7220 NW 39TH MANOR  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: D ( ) Delete  
Name: SOARD, JACQUELINE  
Address: 7220 NW 39TH MANOR  
City-St-Zip: CORAL SPRINGS, FL 33065

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: SOARD, TODD  
Address: 7667 W SAMPLE RD #294  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: D (X) Change ( ) Addition  
Name: SOARD, JACQUELINE  
Address: 7667 W SAMPLE RD #294  
City-St-Zip: CORAL SPRINGS, FL 33065

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TODD SOARD

D

04/14/2002

Electronic Signature of Signing Officer or Director

Date