

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

| | | |
|--|---|---|
| PROFIT CORPORATION ANNUAL REPORT 1996 |  | FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS |
|--|---|---|

DOCUMENT # P95000027531 (9)

1. Corporation Name

TLC EDUCATIONAL CONSULTANTS, INC.



Principal Place of Business

Mailing Address

**530 NEAPOLITAN WAY
NAPLES FL 33940**

**530 NEAPOLITAN WAY
NAPLES FL 33940**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt #, etc

26 Suite, Apt #, etc

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

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9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

3a. Date of Last Report

04/03/1995

4. FEI Number

Applied For

65-0585842

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

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\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

☐

Yes

☐

No

10. Name and Address of New Registered Agent

81 Name

Tom Franchino

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

Franchino & Rawson, P.A.

83

1250 N. Tamiami Trail

84 City

NAPLES

FL

85 Zip Code

34102

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

M Jean Rawson / Tom Franchino 7/1/96

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

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**D
RAWSON, M. JEAN
530 NEAPOLITAN WAY
NAPLES FL 33940 34103**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**D
LISSETTE, ANDREA
4500 THIRD AVE. NW
NAPLES FL 33999**

☐ DELETE

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11 TITLE
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51 TITLE
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61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY - ST - ZIP

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-07/24/96--01015--007
***225.00**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:

M Jean Rawson

7/1/96

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

DATE OF FILING

CR2E034 (3/96)