2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # **P95000039367** Apr 24, 2000 8:00 am Secretary of State 1. Entity Name PREPARATORY SCHOOLS MANAGEMENT, INC. 04-24-2000 90156 020 ***150.00 Mailing Address Principal Place of Business 1600 W. COMMERCIAL BLVD. 1600 W. COMMERCIAL BLVD. FT. LAUDERDALE FL 33309 FT. LAUDERDALE FL 33309-3012 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 65-0593596 Not Applicable Zip Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name MORGAMAN, PHILIP E Street Address (P.O. Box Number is Not Acceptable) 1600 W. COMMERCIAL BLVD. FT. LAUDERDALE FL 33309 Zip Code City FL 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. DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. ☐ Change Addition TITLE Delete TITLE MORGAMAN, PHILIP E NAME: NAME STREET ADDRESS STREET ADDRESS 1600 W. COMMERCIAL BLVD. CITY-ST-ZIP CITY-ST-ZIP FT. LAUDERDALE FL 33309 ☐ Addition ☐ Change DP ☐ Delete TITLE TITI F STEPHENSON, MARK NAME NAME STREET ADDRESS STREET ADDRESS 1600 W COMMERCIAL BLVD CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL 33309 □ Change Addition ☐ Delete TITLE. NICHOLS, NEAL NAME STREET ADDRESS 3251 WASHINGTON BLVD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **ARLINGTON VA 22201** ☐ Change Addition ☐ Delete TITLE CAMILLO, JOHN M NAME NAME STREET ADDRESS STREET ADDRESS 221 W OAKLAND PARK BLVD CITY-ST-ZIP CITY-ST-7JP FT LAUDERDALE FL 33311 ☐ Defete ☐ Change ☐ Addition TITLE TITLE SPRUCE, WILLIAM D NAME NAME STREET ADDRESS 1600 W COMMERCIAL BLVD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL 33309 X Delete ☐ Change X Addition DVST TITLE DVST TITLE Mutnick, Joel NAME GARDNER, DEBORAH S NAME 1600 West Commercial Blvd. STREET ADDRESS STREET ADDRESS 1600 W COMMERCIAL BLVD Ft. Lauderdale, Fl 33309 CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL 33309

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 important 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:

Mark Stephenson, Pres.

AME OF SIGNING OFFICER OR DIRECTOR

4/13/00 (954)493-6565

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Daytime Phone #