

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91802 040 ***150.00

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DOCUMENT # P95000044081

1. Entity Name
LEARNIT CORPORATION



Principal Place of Business
2233 NW 41ST STREET
SUITE 200
GAINESVILLE FL 32606
US

Mailing Address
2233 NW 41ST STREET
SUITE 200
GAINESVILLE FL 32606
US

2. Principal Place of Business

1703 N.W. 80th Blvd
Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 147007
Suite, Apt. #, etc.

City & State
Gainesville FL

City & State
Gainesville FL

4. FEI Number 59-3318548

Applied For
☒ Not Applicable

Zip 32606-9178 Country USA

Zip 32614-7007 Country USA

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

6. Name and Address of Current Registered Agent

SUPPE, DENNIS R
2233 NW 41ST STREET
SUITE 200
GAINESVILLE FL 32606

7. Name and Address of New Registered Agent

Name DENNIS R. Suppe
Street Address (P.O. Box Number is Not Acceptable)
1703 N.W. 80th Blvd
City Gainesville FL Zip Code 32606-9178

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

N/A

4/30/03

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	SUPPE, DENNIS R	
STREET ADDRESS	2233 NW 41ST STREET, SUITE 200	
CITY-ST-ZIP	GAINESVILLE FL 32606	
TITLE	VS	<input type="checkbox"/> Delete
NAME	SUPPE, DEBBIE S	
STREET ADDRESS	2233 NW 41ST STREET, SUITE 200	
CITY-ST-ZIP	GAINESVILLE FL 32606	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	WHITESIDES, TAMMY L	
STREET ADDRESS	2233 NW 41ST STREET, SUITE 200	
CITY-ST-ZIP	GAINESVILLE FL 32606	
TITLE	V	<input type="checkbox"/> Delete
NAME	DILBONE, ROBERT P	
STREET ADDRESS	2233 NW 41ST STREET, SUITE 200	
CITY-ST-ZIP	GAINESVILLE FL 32606	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	PARDI, WILLIAM J	
STREET ADDRESS	2233 NW 41ST STREET, SUITE 200	
CITY-ST-ZIP	GAINESVILLE FL 32606	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	1703 N.W. 80th Blvd	
CITY-ST-ZIP	GAINESVILLE, FL 32606-9178	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	1703 NW 80th Blvd	
CITY-ST-ZIP	GAINESVILLE, FL 32606-9178	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	1703 NW 80th Blvd	
CITY-ST-ZIP	GAINESVILLE FL 32606-9178	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DENNIS R. Suppe

4/30/03 352-375-6655 x222

Date

Daytime Phone #

CR2E034 (10/02)