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Jan 23 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000068690 (3)

1. Corporation Name

AMT LEARNING SOLUTIONS, INC.



Principal Place of Business

2313 W 33RD ST
PANAMA CITY FL 32405

Mailing Address

2313 W 33RD ST
PANAMA CITY FL 32405-1903

3. Date Incorporated or Qualified

10/01/1995

3a. Date of Last Report

03/21/1996

2. Principal Place of Business

21 SAME

2a. Mailing Address

26 Suite, Apt. #, etc.

4. FEI Number

04-2746705

Applied For

Not Applicable

22 City & State

27 City & State

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

24 Zip

Country

28 Zip

Country

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

25

Country

29

Country

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

MCMAHON, PATRICIA J
2313 W 33RD ST
PANAMA CITY FL 32405

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

Signature of the person named as registered agent or officer or director (if applicable)

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

DATE

12. OFFICERS AND DIRECTORS

1 D
NAME MCMAHON, PATRICIA J
STREET ADDRESS 2313 W 33RD ST
CITY-ST-ZIP PANAMA CITY FL 32405

☐ DELETE

2 D
NAME MCMAHON, RICHARD W
STREET ADDRESS 2313 W 33RD ST
CITY-ST-ZIP PANAMA CITY FL 32405

☐ DELETE

3
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

4
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

5
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

6
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

☐ Change ☐ Addition

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

☐ Change ☐ Addition

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

☐ Change ☐ Addition

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

☐ Change ☐ Addition

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

☐ Change ☐ Addition

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

☐ Change ☐ Addition

14. I do 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 included 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Patricia J. McMahon PATRICIA J. McMahon

1-13-97

904 913-8354

CR2E034 (9/96)