

DOCUMENT # P95000071443			
1. Entity Name GLOBAL TRAINING SYSTEMS, INC.			
Principal Place of Business 4370 S TAMiami TRAIL #238 SARASOTA FL 34231 US		Mailing Address 1505 RIDGEWOOD LANE SARASOTA FL 34231-3019	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent			
WORMELLE, JEANNE 1505 RIDGEWOOD LANE SARASOTA FL 34231			Name
			Street Address (if different from above)
			City
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent. SIGNATURE _____ <small>(Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required.)</small>			
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>		FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State	
11. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST WORMELLE, JEANNE 1505 RIDGEWOOD LANE SARASOTA FL	<input type="checkbox"/> Delete	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	
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12.			
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 607.1 of the Florida Statutes, Chapter 607, which provides that a corporation may file a report of change of address without paying the fee if it has changed its address within the last 12 months. If the information is true and accurate, my signature shall have the effect of certifying that the information is true and accurate. My signature shall have the effect of certifying that the information is true and accurate. My signature shall have the effect of certifying that the information is true and accurate.			
SIGNATURE: <u>Jeanne Wormelle</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			

SIGNATURE: Glenn Warmell 3-27-00 941-924-8580
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)