FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 14 1998 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600030208 (8)

THE LEARNING RESOURCE CENTER, INC.

Principal Place	e of Business	Mailing Address			1 10011001 110 10110 01111 00111 00110 11111 00110 11111 00110 11111 10111 10111 10111 10111 10111 10111 10111	
SUITE 210- WINTER PARK FL 82782		634 PINE DRIVE ALTAMONTE SPRINGS FL 32714			DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified 04/01/1996	
2. Principal Place of Business B VD 2a. Mrilling Address					4. FEI Number Applied For	
212356 D Winterwoods		26			59-3374944 Not Applicab	
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional	
		27			Fee Required	
23WinterPark, Fla 23WinterPark, Fla 24 33793 25 USA		City & State			6. Flection Cempaign Financing \$5.00 May Be Trust Fund Contribution ☐ Added to Fees	
		Zip 29	Country 30	,	8. This corporation owes or has paid the current year Intangible Personal Property Tax due Jurie 30. Yes No	
	9. Name and Address of Current F	h			10. Name and Address of New Flegistered Agent	
YA	NUCCI, JAMES		81	Name	e e	
	9. Name and Address of Current Registered Agent YANUCCI, JAMES 634 PINE DRIVE ALTAMONTE SPRINGS FL 32714 11. Pursuant to the provisions of Sections 697.0502 and 607.1508. Florida Statutes, the office or registered agent, or both, in the State of Horida. Such change was authoriz agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.			Stroot	t Address (P.O. Box Number is Not Acceptable)	
			102	82 Street Address (P.O. Box Number is Not Acceptable)		
			63			
1			0.4		leal 7: Oada	
			84	City	FL 85 Zip Code	
11, Pursuant t	to the provisions of Sections 607,0502 a	and 607.1508, Florida Sta	lutes, the abov	e-named	d corporation submits this statement for the purpose of changing its registere	
office or re	egl ste red agent, or both, in the State of m familiar with, and accord the obligation	Horida. Such change wa yos of Section 607 0505	is authorized b Elorida Statute	y the corp	irporation's board of directors. I hereby accept the appointment as registered	
_		· 10 (10) (10 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	, to the contract	•		
SIGNATURE	Signature, typed or posted name of regedured agest a	rid tile if app t cable (N	NOTE Registered Ag	ent signature	re required when reinstating) DATE	
12.	OFFICERS AND I		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	₩-	☐ DEL ETE	1.1 TITLE		Change Addition	
NAME	BEARD, JAMES ! ~		1.2 NAME	į		
STREET ADDRESS	1841 E HORATIO AVE		1,3 STREE	I ADDRESS	i	
CITY-ST-ZIP	MAITLAND FL 32761		1.4 CITY- :	51-ZIP		
TITLE	D	L. DELETE	2.1 TITLE		P.D. VP, S.T. Grange Addition Addition Addition Upon Price Delve	
NAME	YANNUCCI, JAMES		2 2 NAME	,	yanhucci, JAMES	
STREET ADORESS	634 PINE DR		2 3 STREE	1 ADDRESS	634 PINE DRIVE	
CITY-ST-ZIP	ALTAMONTE SPRINGS FL 3271		2 4 CITY-	ST-ZIP	Altamonk Spg 5 /Fla 32714	
TITLE		☐ DELETE	3.1 TITLE		/ Change L Addition	
NAME			3 2 NAME			
STREET ADDRESS			3 3 STREE	1 ADDRESS	· · · · · · · · · · · · · · · · · · ·	
CITY-ST-ZIP			34 CiTY-	ST-ZIP		
TITLE		L] DELETE	4.1 TITLE		Change L_ Addition	
NAME			4. 2 NAME			
STREET ADDRESS			4 3 STREE	T ADDRESS		
CITY-ST-ZIP		F1 acres	4.4 C(TY-	ST - Z IP		
TITLE		DELETE	5.1 111LE		☐ Change ☐ Additio	
NAME			5.2 NAME			
STREET ADDRESS				T ADDRESS		
CITY-\$T-ZIP		Distre	5.4 CITY - 3	ST - ZIP	Change Addition	
TITLE		☐ DELETE	6.1 TITLE		Li Change Li Additio	
NAME			6.2 NAME			

6.3 STREET ADDRESS 6.4 CFTY - ST - ZIP

14. Thereby cortify 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 annual report or supplienced a course 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