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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # P9600087183 (5)

FUN LANGUAGES GAINESVILLE, INC.

Principal Place of Business Mailing Address

FILED Apr 16 1997 8:00am Secretary of State



2616 N.W. 37TH TERRACE GAINESVILLE FL 32605		2616 N.W. 37TH TERRACE GAINESVILLE FL 32605-2642					
					3. Date Incorporated or Qualified 11/01/1996	3a. Date of Last	l Report
2. Principal I	Place of Business	2a. Mailing Address 26			4. FEI Number 59341/464		Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & Sta	le	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
<i>Z</i> ipi 24	Country 25	Zip 29	Country 30	<i>†</i>	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No		
•	9. Name and Address of Curre	ent Registered Agent			10. Name and Address of New Re	istered Agent	
VIS	STELLE, KAYDIE		81	Name			
	16 N.W. 37TH TERRACE INESVILLE FL 32605		82	L	Address (P.O. Box Number is Not Acceptab	le)	
			83				
			84	City	11 - 11 - 11 - 11 - 11 - 11 - 11 - 11	FL 85 Zi	ip Code
11. Pursuam office or agent. h	t to the provisions of Sections 607.05 registered agrint, or both, in the Sta am familiar with, and accept the obli	502 and 607.1508, Florida Statute te of Florida. Such change was a igations of, Section 607.0505, Flo	es, the abov authorized b orida Statute	e-named y the corp s.	corporation submits this statement for the p location's board of directors. I hereby accep	urpose of changing the appointment	its registered as registered
SIGNATURE	Sign of well specifier printed name of ring stered a	ADT	. D		required when reinstating)	0.170	
12.		ND DIRECTORS (NOT)	13.	eni signature	ADDITIONS/CHANGES TO OFFIC	DATE ERS AND DIRECTO	ORS IN 12
111£F		DELETE	1.1 TITLE			Change	
NAME:			1.2 NAME		Kaydie Vistelle 2616 NW 37th Ter.		~
\$TREET ADDRESS			1.3 STREET	ADDRESS	2616 NW 37 TEC.	-	
CITY-SI-ZIP			1.4 CiTY-ST-ZIP		Gainesville, Pl. 32605		
Illif	DELETE 2					Changi	e Addition
NAME:			2.2 NAME				
STREET ADDRESS	2.3			r address			
City SI-7IF				ST-ZIP			
tilit	DELETÉ 3.1					Changi	e Addition
NAM:			. 3.2 NAME				^
STREET ADDRESS			3.3 STREET	- 1		\sim	(6)
CHY+SI+ZIP TILLE		DELETE	3.4. CITY -	ST-ZIP			The state of
NAME		□ otteit	4. 2 NAME			L. Change	THEN !
STREET ADDRESS				r address		\sim	//.
CHY-S1-ZIP			4.4 City-	- 1	•		
		DELETE	5.1 TITLE	DI-ZIF		Changi	e Addition
NAV:		_	. 5.2 NAME				
STREET ADDRESS				I ADDRESS			
CITY - \$1 - 7(P			5.4 CITY-1	- 1			
TITLE		DELETE	6.1 TITLE				e Addition
NAM*			6.2 NAME		00000214 -04/17/970100	<u> 5570</u> °	
STREET ADDRESS			6.3 STREET	F ADDRESS	-U4/1 (/9/U1UU	13027	
CITY - ST - ZIP			6.4 CITY - :	ST- 2 IP	***165.00		
	thy certify that the information suppl	ed with this bling does not qualif			ated in Section 119 07(3)(i). Florida Statutes	I further certify th	at the

4. 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 indicated 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 eath; 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

16 CLOSTICO I KSJABEV Stelle

4/10/97

352-372-688