

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 14, 2001 8:00 am
Secretary of State

06-14-2001 90008 016 ***150.00

DOCUMENT # **P97000061695**

1. Entity Name

WSI-MIAMI, INC.

LA

Principal Place of Business

**515 E. Las Olas Blvd.
 Ste. 1500
 Ft. Lauderdale, FL
 33301**

Mailing Address

**1001 Fleet Street
 Linda Greer, Legal
 8th Floor
 Baltimore, MD 21201**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0768949

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**Capitol Corporate Services, Inc.
 1333 North Duval
 Tallahassee, FL 32303**

Name

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

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!! FEE IS \$150.00

After MAY 1, 2001 Fee will be \$550.00

Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **Dir. / President** ☐ Delete
 NAME **Hoehn-Saric, R.C.**
 STREET ADDRESS **1001 Fleet Street**
 CITY-ST-ZIP **Baltimore, MD 21202**

TITLE ☐ Change ☐ Addition
 NAME ☐ Change ☐ Addition
 STREET ADDRESS ☐ Change ☐ Addition
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE **Sr. VP / Sec. Treasurer** ☐ Delete
 NAME **Zentz, Robert W.**
 STREET ADDRESS **1001 Fleet Street**
 CITY-ST-ZIP **Baltimore, MD 21202**

TITLE ☐ Change ☐ Addition
 NAME ☐ Change ☐ Addition
 STREET ADDRESS ☐ Change ☐ Addition
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE **Dir. / VP** ☐ Delete
 NAME **McGee, B.L.**
 STREET ADDRESS **1001 Fleet Street**
 CITY-ST-ZIP **Baltimore, MD 21202**

TITLE ☐ Change ☐ Addition
 NAME ☐ Change ☐ Addition
 STREET ADDRESS ☐ Change ☐ Addition
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE **Dir.** ☐ Delete
 NAME **Becker, Douglas L.**
 STREET ADDRESS **1001 Fleet Street**
 CITY-ST-ZIP **Baltimore, MD 21202**

TITLE ☐ Change ☐ Addition
 NAME ☐ Change ☐ Addition
 STREET ADDRESS ☐ Change ☐ Addition
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE **VP / Assistant Treasurer** ☐ Delete
 NAME **Creamer, Sean**
 STREET ADDRESS **1001 Fleet Street**
 CITY-ST-ZIP **Baltimore, MD 21202**

TITLE ☐ Change ☐ Addition
 NAME ☐ Change ☐ Addition
 STREET ADDRESS ☐ Change ☐ Addition
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ☐ Delete
 NAME ☐ Delete
 STREET ADDRESS ☐ Delete
 CITY-ST-ZIP ☐ Delete

TITLE ☐ Change ☐ Addition
 NAME ☐ Change ☐ Addition
 STREET ADDRESS ☐ Change ☐ Addition
 CITY-ST-ZIP ☐ Change ☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(410) 843-8000

Date

Daytime Phone #

CR2E034 (11/00)



SYLVAN
LEARNING SYSTEMS, INC

1001 FLEET STREET
BALTIMORE, MD 21202
TEL: (410) 843-8000
WWW.SYLVAN.NET

Attachment
D# P97002266
A0072985

June 7, 2001

Uniform Business Report
Division of Corporations
409 East Gaines Street
Tallahassee, FL 32399

Re: **Business Corporation Annual Report for WSI-Miami, Inc.**

Dear Sir/Madam:

Enclosed please find the completed and fully executed original for WSI's 2001 Uniform Business Report, including a check in the amount of \$150.00 (#025845) for fees that are required.

Per my phone call to your office, I explained that I did not receive the Business Report for Sylvan. I was told to send a check in the amount of \$150.00 but to but to explain in my letter that I did not get the report. After the filing has been made, please confirm the receipt and acceptance of this filing. I have included an extra copy for your stamp of confirmation.

Any correspondence regarding this filing should be directed to me at the following address:

Linda L. Greer
Sylvan Learning Systems, Inc.
Legal Department, 8th Floor
1001 Fleet Street
Baltimore, MD 21202

If you need any further information, do not hesitate to contact me at (410) 843-8924.

Sincerely,

Linda L. Greer
Legal Administrative Assistant