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PROFIT CORPORATION ANNUAL REPORT

1998



H ORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000061929 (0)

## FILED May 19 1998 8:00am Secretary of State

ACADEMY 2000, INC. Principal Place of Business Mailing Address 637 TAMPA AVE. 637 TAMPA AVE. ORLANDO FL 32806 ORLANDO FL 32805 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/16/1997 2a, Mailing Address 4. FEI Number 2. Principal Place of Business Applied For 7648 Telford Ut 59-346-2366 Not Applicable 21 Suite, Apt. #, etc Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Orlando 23 Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible Orange 24 25 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent RISPER, JOHN C 637 TAMPA AVE. 82 Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32805 83 City 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. Applications of, Section 607.0505, Florida Statutes. John C. Risper, Pice president SIGNATURE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE T)T) E 1.1 THUE Change RISPER, BEVERLY NAME 1.2 NAME 7648 TELFORD COURT STREET ADDRESS 1.3 STREET ADDRESS ORLANDO FL 32818 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 21 TITLE RISPER, JOHN C. 2 2 NAME 7648 TELFORD COURT STREET ADDRESS 2.3 STREET ADDRESS **ORLANDO FL 32818** CITY-ST-ZIP 2 4 CHY - ST - 7/P DELETE 3.1 TITLE Change Addition TITLE NAME FORMOR, PAMELA 3.2 NAME 7649 TELFORD COURT STREET ADORESS 3.3 STREET ADDRESS ORLANDO FL 32818 CITY-ST-ZIP 3.4 CITY-ST-ZIP DELETE Change Addition TITLE 4.1 11TLE EVANS, CHRISTINE V. NAME 4.2 NAME 2017 LIVINGSTON STREET STREET ADDRESS 4.3 STREET ADDRESS **ORLANDO FL 32805** CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 52 NAME STREET ADDRESS 5 3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST- ZIP DELETE Change Addition TITLE 61 THLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

14. Thereby 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 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 11 or Block 12 or Block 12 or Block 12 or Block 12 or Block 13 or or an attachment with an address.

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JOHN C. Rise

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(407) 200-51110