

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 26, 2004 8:00 am
Secretary of State

07-26-2004 90011 026 ***150.00

DOCUMENT # P98000002877

1. Entity Name
FINANCIAL EDUCATION CENTERS, INC.



Principal Place of Business
**1530 BUSINESS CENTER DR.
SUITE 3
ORANGE PARK, FL 32003**

Mailing Address
**C/O BARRY J FULLER
2301 PARK AVE., #404
ORANGE PARK, FL 32073**

44049975



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

07102004

Chg-P

CR2E034 (10/03)

City & State

City & State

4. FEI Number

59-3485533

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**FULLER, BARRY J
2301 PARK AVENUE., #404
ORANGE PARK, FL 32073**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
MCLEAN, DONNA S
1723 COLONIAL DR
GREEN COVE SPRINGS, FL 32043** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
MCLEAN, DONNA S
1678 Colonial Drive
Green Cove springs, Florida 32043** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

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STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

12. 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 10 or Block 11 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

Date

Daytime Phone #

Attachment

44049975

P98000002877

FULLER & ASSOCIATES
ATTORNEYS AT LAW

BARRY J. FULLER
MEMBER FLORIDA AND CALIFORNIA BARS

July 10, 2004

Secretary of State
Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314

Re: 2003 Uniform Business Report

Dear Sir/Madame:

Enclosed herewith please find the 2003 Uniform Business Report which I downloaded from your Internet site, along with my clients check in the amount of \$150.00 to cover such filing fee. As of this date, our office has not received the 2003 Business Report nor has our client, therefore we are requesting that the penalty be waived.

Should you have any questions concerning the above, please feel free to give me a call.

Sincerely yours,



Terri Wegmann
Paralegal to
Barry J. Fuller

tbw:
Enclosure

cc: Mr. Larry McLean