Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90161 035 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000024730

1. Corporation Name

BACK TO) BASICS SCHOOL, INC.								
Principal Place	of Business	Mailing Ac	idress				i indiinat iin inini (biit abiit baiit baiit baiit	'R (IRIL BIAL) IARAR I	ititt Bett teet
253 GROVE CIRCLE S. 253 GROVE CIRCLE S. DUNEDIN FL 34698 DUNEDIN FL 34698							DO NOT WRITE IN THI	S SPACE	
•							3. Date Incorporated or Qualifed 03/12/1998		
2. Principal Pl	ace of Business	2a. Mailing	Address		_		4. FEI Number	ļ . 	lied For
21		26					59-3506420		Applicable
Suite, Apt.	#, etc.		Apt. #, etc.				5. Certificate of Status Desired	\$8.75 A	
22		27 City &	State				a Flactice Committee Financing		<u> </u>
City & State	3	28	- Clair				Election Campaign Financing Trust Fund Contribution	\$5.00 h Added to	, ,
Zip	Country	Zip		Country	/		8. This corporation owes the current year	ntangible	
24	25	29	30	7			Personal Property Tax.	∐Yes [□No Í
	9. Name and Address of Curren	t Registered A		`			10. Name and Address of New Registere	d Agent	
				81	Name				
PERRY, CHARLES					Street	Addres	ss (P.O. Box Number is Not Acceptable)		
1100 CLEVELAND ST.					1				
CLEARWATER FL 34615				83					
					City		F	85 Zip C	ode
007 0500									registered
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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.									
SIGNATURE									
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Register					nt signature	required v	vhen reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTOL	DC (N) 12
12.		D DIRECTORS		13.		т	ADDITIONS/CHANGES TO OFFICERS A	Change	Addition
TITLE	D		☐ DELETE	1.1 TITLE				Onunge	
NAME	PASCO, JOAN			1.2 NAME					}
STREET ADDRESS	253 GROVE CIRCLE S.			1.3 STREE	TADDRESS				1
CITY-ST-ZIP	DUNEDIN FL 34698		~	1.4 CITY-S	ST-ZIP	↓		Change	Addition
TITLE	D		☐ DELETE	2.1 TITLE		}		Change	☐ Addition [
NAME	PASCO, MALLORY			2.2 NAME					1
STREET ADDRESS	253 GROVE CIRCLE S.				TADDRESS				
CITY-ST-ZIP	DUNEDIN FL 34698			2.4 CITY-	ST-ZIP	┼		☐ Change	Addition
TITLE	<u> </u>		DÉLETE	3.1 TITLE				Criange	
NAME		•		3.2 NAME					
STREET ADDRESS	. ,		i		T ADDRESS				
CITY-ST-ZIP			DELETE	3.4. CITY-	SI-ZP	+		Change	Addition
TITLE NAME			□ DEFEIE	4.1 TITLE 4.2 NAME				Cl survigo	
STREET ADDRESS					T ADDRESS				
CITY-ST-ZIP				4.4 CITY-5					
TITLE		- 101.0	☐ DELETE	5.1 TITLE				Change	Addition
NAME				5.2 NAME		ĺ			

14. 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 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 13 if changed, or en an attachment with an address, with all other like empowered.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY- ST-ZIP

6.1 TITLE

6.2 NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ DELETE

☐ Change

☐ Addition

CR2E034 (11/98).