2001 UNIFORM BUSINESS REPORT (UBR)

04-26-2001 90145 030 ***150.00
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FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
01 JUN -5 PM 2:54

DOCUMENT # P99000099204

1. Entity Name
EARTHSCHOOLS.COM, INC.

Principal Place of Business	Mailing Address
570 SOUTH ELLIS ROAD SUITE 210 JACKSONVILLE FL 32254	570 SOUTH ELLIS ROAD SUITE 210 JACKSONVILLE FL 32254
2. Principal Place of Business	3. Mailing Address: c/o Arnold H. Slott, Esq. 334 E. Duval St.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State: Jacksonville, Fla
Zip / Country	Zip: 32202 Country: USA

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3604403 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

Arnold H. Slott, Esquire
Slott + Barker
334 E. Duval St.
Jacksonville, FL 32202

7. Name and Address of New Registered Agent
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]
Signature, typed or printed name of registered agent and title if applicable
NOTE: Registered Agent signature required when changing Registered Agent
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	D SCHAFFER, CLARK D 570 SOUTH ELLIS ROAD SUITE 210 JACKSONVILLE FL 32254	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HEUGEL, CHARLES H II 570 SOUTH ELLIS ROAD SUITE 210 JACKSONVILLE FL 32254	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D, VP Heugel, Charles H, II P.O. Box 60847 Jacksonville, Fl 32236	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D, P, S Heugel, Charles H. P. O. Box 60847 Jacksonville, FL 32202	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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CR2E034 (10/00)

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] CHARLES HEUGEL II V.P. 04/10/01 (904) 695-2899
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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