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

CORPORATION **ANNUAL REPORT**

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S86339 LEARNSAT COMMUNICATIONS, INC. (6)

FILED May 04 1998 8:00am Secretary of State



Principal Place of Business Mailing Address							URIS OFFICE UNDER U	(B)) AIBI) AIAI	A MANAL LANGE
821 E 48TH S STILLWATER (US			821 3 46TH STREET STILLWATER OK 74074 US			DO NOT WRIT	E IN THIS SF	PACE	
						 Date Incorporated or Qualified 10/02/1991 			
2. Principal Pl	ace of Business	2s. Mailing	2a. Mailing Address			4. FEI Number Applied For			plied For
21		26	26			59-3134487	Not Applicable		
Suite, Apt. i	, etc.	Suite, A	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 A	
22		27				G. Certificate of Status Desired		Fee Re	quired
City & State	•	City & S	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip	Country	Zip	Zip Country			8. This corporation owes or has paid the current year Intangible			
24	26 29 30			0	Personal Property Tax due June 30. Yes No				
9. Name and Address of Current Registered Agent					l Name	10. Name and Address of New R	egistered A	gent	
	EWER, LINDA			81	Name				
	550 CYPRESS COURT				Street Ad	Street Address (P.O. Box Number is Not Acceptable)			
LEE	ESBURG FL 34788			83	 				
				84	City		FL	85 Zip (Code
11. Pursuant t	o the provisions of Sections 607	7.0502 and 607.1508,	Florida Statutes	, the abov	e-named co	rporation submits this statement for the		changing it	s registered
office or re agent. I ar	egistered agent, or both, in the s in familiar with, and accept the c	State of Florida, Such obligations of, Section	change was aut 607.0505, Florid	thorized bi da Statute	y the corpor s.	rporation submits this statement for the ation's board of directors. I hereby acceptance	ept the appo	ntment as	registered
SIGNATURE									
	Signalize, typed or printed name of register OFFICE DS	ed agent and title diapplicable SIAND DIRECTORS	(NOTE F	Registered Ag	ent signature req	ulred when reinstating) ADDITIONS/CHANGES TO OFF	DATE CERS AND	DIRECTOR	C IN 12
12.	DP		DELETE	1.1 TITLE	1	ADDITIONS/CHANGES TO OTT		Change	Addition
NAME	22222		1.2 NAME			•			
STREET ADDRESS	35550 CYPRESS COURT			1.3 STREET ADDRESS					
CITY-ST-ZIP	LEESBURG FL			1.4 CITY-					
TITLE	CTS DELETE		DELETE	2.1 TITLE				Change	☐ Addition
NAME	BREWER, LINDA			22 NAME					Ì
STREET ADDRESS	35550 CYPRESS COURT	•		2.3 STREE	TADORESS				
CITY-ST-ZIP	LEESBURG FL			2.4 CITY-	ST-ZIP				
TITLE			DELETE	3.1 TITLE				Change	Addition
NAME				3.2 NAME					l
STREET ADDRESS				3.3 STREE	T ADDRESS]
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TITLE		L	DELETE	4.1 TITLE			ι	Change	Addition
NAME				4. 2 NAME	1				
STREET ADDRESS					T ADORESS				
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TITLE NAME				5.2 NAME					
STREET ADDRESS					T ADDRESS				
CITY-ST-ZIP				5.4 CITY - 5					
TITLE			DELETE	6.1 TITLE		 		Change	Addition
NAME				6.2 NAME					
STREET ADDRESS				6.3 STREE	T ADDRESS				
CITY-ST-ZIP				6.4 CITY-	ST-ZIP				
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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 on an attachment with an address.