

**2001 UNIFORM BUSINESS REPORT (UBR)**

5/2

**FILED**  
**Jun 02, 2001 8:00 am**  
**Secretary of State**

05-22-2001 90055 032 \*\*\*\*61.25

DOCUMENT # **N98000006323**

1. Entity Name

MACDILL EDUCATION COUNCIL, INC.

Principal Place of Business      Mailing Address  
 8208 Hangar Loop Dr, Ste 5      PO Box 6766  
 MacDill AFB FL 33621      MacDill AFB FL 33608

2. Principal Place of Business      3. Mailing Address  
 Suite, Apt. #, etc.      Suite, Apt. #, etc.

City & State      City & State

Zip      Country      Zip      Country

4. FEI Number      Applied For  
**59-3520209**      Not Applicable

5. Certificate of Status Desired       **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

**6. Name and Address of Current Registered Agent**

Pedigo, Ryan J.  
 8415 Bayshore Blvd  
 MacDill AFB FL 33621

**7. Name and Address of New Registered Agent**

Name  
**Linda M. Valinho**  
 Street Address (P.O. Box Number is Not Acceptable)  
**2013 Bridgehampton Place**  
 City      FL      Zip Code  
**Brandon      33511**

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 *Linda M. Valinho* **Linda M. Valinho, President**      **19 April 2001**  
Signature, typed or printed name of registered agent and title if applicable.      (NOTE: Registered Agent signature required when reinstating)      DATE

**FILE NOW:  
 FEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution.       **\$5.00 May Be Added to Fees**

**Make Check Payable to Department of State**

**10. OFFICERS AND DIRECTORS**

TITLE NAME	Pedigo, Ryan J.	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	8415 Bayshore Blvd	
CITY-ST-ZIP	MacDill AFB FL 33621	
TITLE NAME	Miranda, Joni L.	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	8208 Hangar Loop Dr, Ste 7	
CITY-ST-ZIP	MacDill AFB FL 33621	
TITLE NAME	Wehde, Richard A.	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	8208 Hangar Loop Dr., Ste 1	
CITY-ST-ZIP	MacDill AFB FL 33621	
TITLE NAME	Thompson, Kristina	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	2606 Brown Pelican Ave.	
CITY-ST-ZIP	MacDill AFB FL 33621	
TITLE NAME		<input type="checkbox"/> Delete
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Delete
STREET ADDRESS		
CITY-ST-ZIP		

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10**

TITLE NAME	President Linda M. Valinho	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	2013 Bridgehampton Pl	D
CITY-ST-ZIP	Brandon FL 33511	
TITLE NAME	Vice President Edward J. Towner	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	5505 Chiles Lane	D
CITY-ST-ZIP	Lakeland FL 33810	
TITLE NAME	Secretary Julie Keck	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	934 Harbour Bay Dr	D
CITY-ST-ZIP	Tampa FL 33602	
TITLE NAME	Treasurer Anna D. Gulley	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	14614 Turtle Creek Circle, Apt 411	D
CITY-ST-ZIP	Lutz FL 33549	
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		

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 617, 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: *Linda M. Valinho* **Linda M. Valinho**      **19 April 2001**      **(813)828-1122**  
Signature and typed or printed name of signing officer or director      Date      Daytime Phone #

CR2E037 (1/1/00)