2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

May 02, 2003 8:00 am Secretary of State DOCUMENT # 746729 1. Entity Name 05-02-2003 90177 001 ****61.25 THE CHILDREN'S MUSEUM, INC. 05-02-2003 90177 002 *****8.75 Principal Place of Business Mailing Address 498 CRAWFORD BLVD. 498 CRAWFORD BLVD. **BOCA RATON FL 33432 BOCA RATON FL 33432** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES City & State City & State Applied For 4. FEI Number 59-6652019 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent OSBORNE, R. BRADY, JR. Street Address (P.O. Box Number is Not Acceptable) % OSBORNE, HANKINS, MACLAREN & REDGRAVE 998 S. FEDERAL HIGHWAY **BOCA RATON FL 33432** City Zin 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) \$5.00 May Be Make Check Payable to 9. Election Campaign Financing FILE NOW: FEE IS \$61.25 \Box Trust Fund Contribution. Florida Department of State Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. ☐ Change ☐ Delete TITLE ☐ Addition ANDERSON, BLAIR NAME NAME 413 BUTTONWOOD PLACE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **BOCA RATON FL 33431** CITY-ST-ZIP Secretary Schiedel Delete TITLE TITLE ROSS, SISTER ELIZABE NAME NAME Christine BI SW 15th Street Oca Raton, FL 33432 961 W. ROYAL PALM RD STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33486** CITY-ST-ZIP CITY-ST-ZIP TD Change TITLE Delete TITLE Tom Neuman 2800 Palmwood Frace # 122 ANDERSON, BLAIR NAMĖ NAME STREET ADDRESS 600 ELM TREE LANE STREET ADDRESS Booa Raton, FL 38431 CITY-ST-ZIP **BOCA RATON FL 33432** CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition MERCIER, POPPI NAME NAME

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 eath; 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

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30 SW 5TH AVENUE

BOCA RATON FL

4/30/03

561-368-6875

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