2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N00000005558

Entity Name: EVERY CHILD, INC.

FILED Jan 09, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1355 W. WAY DR. 1700 NORTH DRIVE SARASOTA, FL 342361122 SARASOTA, FL 34239 **Current Mailing Address: New Mailing Address:** 1355 W. WAY DR 1700 NORTH DRIVE SARASOTA, FL 342361122 SARASOTA, FL 34239 FEI Number: 65-1035374 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WEBBER, DEE 4933 RUTLAND GATE SARASOTA, FL 34235 US 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete ALEXANDER, JUDY ALEXANDER, JUDY Name: Name: 1355 WEST WAY DR Address: 1700 NORTH DRIVE Address: City-St-Zip: SARASOTA, FL 34236 City-St-Zip: SARASOTA, FL 34239 Title: () Delete Title: () Change () Addition Name: WEBBER, DEE Name: Address: 4933 RUTLAND GATE Address: City-St-Zip: SARASOTA, FL 34235 City-St-Zip: Title: () Delete Title: (X) Change () Addition ALEXANDER, BARRY Name: ALEXANDER, BARRY Name: Address: 1355 WEST WAY DR Address: 1700 NORTH DRIVE City-St-Zip: SARASOTA, FL 34236 City-St-Zip: SARASOTA, FL 34239 Title: () Delete Title: () Change () Addition Name: WEBBER, TOM Name: Address: 4933 RUTLAND GATE Address: City-St-Zip: SARASOTA, FL 34235 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JUDY S. ALEXANDER D 01/09/2002