

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000001922

1. Entity Name

RACHEL'S CHILDREN INTERNATIONAL, INC.

FILED
Apr 11, 2000 8:00 am
Secretary of State

04-11-2000 90232 031 ****70.00

Principal Place of Business

Mailing Address

737 BYWOOD DR NE
 PALM BAY FL 32905

737 BYWOOD DR NE
 PALM BAY FL 31410-0628

2. Principal Place of Business

4399 NORTH HANSON CITY BLVD
 Suite, Apt. #, etc.

3. Mailing Address

4399 NORTH HANSON CITY BLVD
 Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

MELBOURNE, FL

City & State

MELBOURNE, FL

4. FEI Number

59-3439281

Applied For

Not Applicable

Zip

32935

Country

Zip

32935

Country

5. Certificate of Status Desired



\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

THOMAS, RUSSELL M
 737 BYWOOD DR NE
 PALM BAY FL 32905

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

Russell M THOMAS, *Russell M Thomas*

10 APRIL 2000

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: DP Delete
 NAME: THOMAS, JANE E
 STREET ADDRESS: 737 BYWOOD DR NE
 CITY-ST-ZIP: PALM BAY FL 32905

TITLE: D Change Addition
 NAME: MERRITT F THOMAS
 STREET ADDRESS: 2442 BRANDY MILL
 CITY-ST-ZIP: HOUSTON, TX, 77067

TITLE: DV Delete
 NAME: THOMAS, RUSSELL M
 STREET ADDRESS: 737 BYWOOD DR NE
 CITY-ST-ZIP: PALM BAY FL 32905

TITLE: Change Addition
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:
 Change Addition

TITLE: D Delete
 NAME: GOLDBERG, HEDWIG
 STREET ADDRESS: 280 COWNIE AVE SE
 CITY-ST-ZIP: PALM BAY FL 32907

TITLE: Change Addition
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:
 Change Addition

TITLE: Delete
 NAME:
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 CITY-ST-ZIP:
 Change Addition

TITLE: Change Addition
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TITLE: Delete
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TITLE: Delete
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 Change Addition

TITLE: Change Addition
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:
 Change Addition

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:

Russell M THOMAS *Russell M Thomas*

10 APRIL 2000

912-898-1891

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)