

2000 UNIFORM BUSINESS REPORT (UBR)

8/

FILED
Sep 05, 2000 8:00 am
Secretary of State

08-15-2000 90010 039 ****61.25

DOCUMENT # N97000003266

1. Entity Name

KIND PROGRAM, INC.



Principal Place of Business

1000 CLINT MOORE RD. SUITE #201
 BOCA RATON FL 33487

Mailing Address

1000 CLINT MOORE RD. SUITE #201
 BOCA RATON FL 33487

2. Principal Place of Business

951 Yamato Rd

Suite, Apt. #, etc.

Mail Stop C-40

City & State

Boca Raton FL

Zip

33431

Country

USA

3. Mailing Address

951 Yamato Rd

Suite, Apt. #, etc.

Mail Stop C-40

City & State

Boca Raton, FL

Zip

33431

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0765570

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

GITLIN, BOB

1000 CLINT MOORE RD, SUITE #201
 BOCA RATON FL 33487

7. Name and Address of New Registered Agent

Name

Lindsay Duval

Street Address (P.O. Box Number is Not Acceptable)

951 Yamato Rd

Mail Stop C-40

City

Boca Raton

FL

Zip Code

33431

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

[Signature]

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

8/10/00

DATE

FILE NOW: FEE IS \$61.25
After September 13, 2000 min. will be \$236.25

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	D	☒ Delete
NAME	WAGENTI, ANGELA	
STREET ADDRESS	1000 CLINT MOORE RD, SUITE #201	
CITY-ST-ZIP	BOCA RATON FL 33487	
TITLE	D	☐ Delete
NAME	DUVAL, LINDSAY	
STREET ADDRESS	2647 NW 64TH BLVD	
CITY-ST-ZIP	BOCA RATON FL 33496	
TITLE	D	☒ Delete
NAME	ROBERTS, JIM	
STREET ADDRESS	2743 NW 28TH ST	
CITY-ST-ZIP	BOCA RATON FL 33433	
TITLE	D	☒ Delete
NAME	GITLIN, BOB	
STREET ADDRESS	1000 CLINT MOORE RD, SUITE #201	
CITY-ST-ZIP	BOCA RATON FL 33487	
TITLE	D	☒ Delete
NAME	KANZLER-HAYS, LISA	
STREET ADDRESS	2750 PARK OF COMMERCE DRIVE	
CITY-ST-ZIP	BOCA RATON FL 33487	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	☐ Change ☒ Addition
NAME	Deborah Prehn	
STREET ADDRESS	6150 Amberwood Drive	
CITY-ST-ZIP	BOCA RATON, FL 33433	
TITLE	D	☐ Change ☒ Addition
NAME	Christopher Root	
STREET ADDRESS	399 NW Boca Raton Blvd, STE 200	
CITY-ST-ZIP	BOCA RATON, FL 33432	
TITLE	D	☐ Change ☒ Addition
NAME	Elizabeth Fletcher	
STREET ADDRESS	280 E. Palmetto Park Rd.	
CITY-ST-ZIP	BOCA RATON FL 33432	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
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 life empowered.

SIGNATURE:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/10/00

Date

361-789-5930

Daytime Phone #

CR2E037 (5/00)