## 2002 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# N97000003266

Entity Name: KIND PROGRAM, INC.

FILED Jan 09, 2002 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 499 E PALMETTO PARK ROAD BOCA RATON, FL 33432 **Current Mailing Address: New Mailing Address:** 499 E PALMETTO PARK ROAD BOCA RATON, FL 33432 FEI Number: 65-0765570 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: SCHECHTER, ELLEN 1900 NW CORPORATE BLVD, SUITE 400 EAST BOCA RATON, FL 33431 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 FLETCHER, ELIZABETH FLETCHER, ELIZABETH Name: Name: 280 E PALMETTO PARK ROAD Address: 280 E PALMETTO PARK ROAD Address: City-St-Zip: BOCA RATON, FL 33432 City-St-Zip: BOCA RATON, FL 33432 Title: Title: ( ) Delete () Change () Addition LAMM, CAROL Name: Name: Address: 499 E PALMETTO PARK ROAD Address: City-St-Zip: BOCA RATON, FL 33432 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition PREHN, DEBORAH Name: DUVAL, LINDSAY Name: 499 E PALMETTO PARK ROAD 499 E PALMETTO PARK ROAD Address: Address: City-St-Zip: BOCA RATON, FL 33432 City-St-Zip: BOCA RATON, FL 33432 Title: TD ( ) Delete Title: () Change () Addition ROOT, CHRISTOPHER Name: Name: Address: 399 NW BOCA RATON BLVD, STE 200 Address: City-St-Zip: BOCA RATON, FL 33432 City-St-Zip: Title: () Delete Title: () Change () Addition ROTZ, TOM Name: Name: 2000 N 19TH ST Address: Address: City-St-Zip: BOCA RATON, FL 33431 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition VUSCAVAGE, GEORGE KOONTZ, SHERRY Name: Name: Address: 1800 N DIXIE HIGHWAY Address: 499 E PALMETTO PARK RD BOCA RATON, FL 33432 BOCA RATON, FL 33432 City-St-Zip: 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: CHRISTOPHER L. ROOT TD 01/09/2002

HEATHER WILLIS, DIRECTOR 499 E PALMETTO PARK RD BOCA RATON, FL 33432

ANNE VEGSO, DIRECTOR 499 E PALMETTO PARK RD BOCA RATON, FL 33432

KRIS SUDAN, DIRECTOR 499 E PALMETTO PARK RD BOCA RATON, FL 33432

JAMES E. HOLE, DIRECTOR 499 E PALMETTO PARK RD BOCA RATON, FL 33432