

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 01, 2004 8:00 am
Secretary of State

03-01-2004 90027 023 ****61.25

DOCUMENT # N97000003266 1. Entity Name KIND PROGRAM, INC.					
Principal Place of Business 499 E PALMETTO PARK ROAD BOCA RATON, FL 33432			Mailing Address 499 E PALMETTO PARK ROAD BOCA RATON, FL 33432		
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country			3. Mailing Address Suite, Apt. #, etc. City & State Zip Country		
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 SCHECHTER, ELLEN 1900 NW CORPORATE BLVD, SUITE 400 EAST BOCA RATON, FL 33431				7. Name and Address of New Registered Agent 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. 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) DATE					
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FLETCHER, ELIZABETH 280 E PALMETTO PARK ROAD BOCA RATON, FL 33432	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Fletcher, Elizabeth 280 E Palmetto Park Road Boca Raton, FL 33432	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JAMES, BRYAN 499 E PALMETTO PARK ROAD BOCA RATON, FL 33432	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Cwick, Natalie 1800 Corporate Blvd. NW #100 Boca Raton, FL 33431	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DUVAL, LINDSAY 499 E PALMETTO PARK ROAD BOCA RATON, FL 33432	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Kasrebaum, Betsy 7900 Glades Rd. #420 Boca Raton, FL 33434	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD ROOT, CHRISTOPHER 399 NW BOCA RATON BLVD, STE 200 BOCA RATON, FL 33432	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Roberts, Michaelanne 2743 NW 28th St. Boca Raton, FL 33434	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RESNICK, MONTE 499 E PALMETTO PARK ROAD BOCA RATON, FL 33432	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Brown-mum, Kelley 101 N. Federal Hwy. Boca Raton, FL 33432	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD KOONTZ, SHERRY 499 E PALMETTO PARK RD BOCA RATON, FL 33432	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Ferguson, Timothy 301 Yamato Rd. #4150 Boca Raton, FL 33431	☐ 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: <u>Christopher L Root</u> Christopher L. Root 1/15/04 561-392-7929					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					