

04-21-2002 90843 010 ****61.25

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000003901

1. Entity Name

ABOUT CHILDREN, INC. ✓

Principal Place of Business

Mailing Address

127 VENTNOR I
DEERFIELD BEACH FL 33442

127 VENTNOR I
DEERFIELD BEACH FL 33442

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0932032

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ROBINSON, E. JANE
127 VENTNOR I
DEERFIELD BEACH FL 33442

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

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 DS Delete
NAME LEZCANO, BRANDI
STREET ADDRESS 1309 NW AVE
CITY-ST-ZIP BELLE GLADE FL 33430

TITLE PRESIDENT/DIRECTOR Change Addition
NAME STANLEY MASONBERG
STREET ADDRESS 7086 GRASSY BAY DRIVE
CITY-ST-ZIP WEST PALM BEACH, FL 33411

TITLE T Delete
NAME SACHAROW, HELENE
STREET ADDRESS 2560 RIVIERA DRIVE
CITY-ST-ZIP DELRAY BEACH FL 33445

TITLE DIRECTOR Change Addition
NAME HELENE SACHAROW
STREET ADDRESS 2560 RIVIERA DRIVE
CITY-ST-ZIP DELRAY BEACH, FL 33445

TITLE DVP Delete
NAME HUNTER, LINDA
STREET ADDRESS 2773 SOUTH OCEAN BLVD.
CITY-ST-ZIP PALM BEACH FL 33480

TITLE DIRECTOR/TREASURER Change Addition
NAME CYNTHIA ROSENBAUM
STREET ADDRESS 7742 NILE RIVER ROAD
CITY-ST-ZIP WEST PALM BEACH, FL 33411

TITLE DP Delete
NAME CHARLOTTE TARELL
STREET ADDRESS 11359 MEADOWLARK CIRCLE
CITY-ST-ZIP BOYNTON BEACH FL 33436

TITLE DIRECTOR Change Addition
NAME MARGIE MASONBERG
STREET ADDRESS 7086 GRASSY BAY DRIVE
CITY-ST-ZIP WEST PALM BEACH, FL 33411

TITLE D Delete
NAME ZIPPER, SUE
STREET ADDRESS 360 EAST COCONUT PALM ROAD
CITY-ST-ZIP BOCA RATON FL 33432

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
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 like empowered.

SIGNATURE: *[Signature]* REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-11-02

Date

Daytime Phone #

CR2E037 (9/01)