2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P9900066448 Mar 02, 2001 8:00 am 1. Entity Name **Secretary of State** KINNEY'S KIDS, INC. 03-02-2001 90089 035 ***150.00 Principal Place of Business Mailing Address 11803 CLUBHOUSE DR 11803 CLUBHOUSE DR **BRADENTON FL 34202 BRADENTON FL 34202** 120110 2. Principal Place of Business 3. Mailing Address #4 FL Suite Ant # etc DO NOT WRITE IN THIS SPACE almbrush Trail 1520 Applied For 4. FEI Number 65-0937441 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired 34202 USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent GREENE, ROBERT F Street Address (P.O. Box Number is Not Acceptable) 1304 SIXTH AVENUE W. SUITE 400 **BRADENTON FL 34205** City 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 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ■ Addition KINNEY, GREGORY NAME NAME 11803 CLUBHOUSE DR STREET ADDRESS STREET ADDRESS CITY-ST-ZiP **BRADENTON FL 34202** CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition KINNEY, DEBRA J NAME STREET ADDRESS 11803 CLUBHOUSE DR STREET ADDRESS CITY-ST-7IP **BRADENTON FL 34202** CITY-ST-7IP TITLE ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IF CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

CR2E034 (10/00)