2022 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jun 29, 2022
Secretary of State
4386628138CC

DOCUMENT# 724048

Entity Name: KIDS, INCORPORATED OF THE BIG BEND

Current Principal Place of Business:

306 LAURA LEE AVENUE
TALLAHASSEE, FL 32301

Current Mailing Address:

PO BOX 16639
TALLAHASSEE, FL 32301 US

FEI Number: 23-7411718

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HEIDEL, LAFONDA
306 LAURA LEE AVENUE
TALLAHASSEE, FL 32301 US

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: LAFONDA HEIDEL 06/29/2022

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	DIRECTOR
Name	MCCLURE, LEILA
Address	342 RUGER COURT
City-State-Zip:	TALLAHASSEE FL 32312

Title	SECRETARY
Name	GALBAN-COUNTRYMAN, KIMBERLY
Address	3248 STORRINGTON DRIVE
City-State-Zip:	TALLAHASSEE FL 32309

Title	DIRECTOR
Name	WALKER, KAREN
Address	315 SOUTH CALHOUN STREET SUITE 600
City-State-Zip:	TALLAHASSEE FL 32301

Title	TREASURER
Name	GUNTER, BART
Address	3449 MAHONEY DRIVE
City-State-Zip:	TALLAHASSEE FL 32309

Title	DIRECTOR
Name	THOMAS, PATTY BALL PHD
Address	444 GAMBLE STREET BLDG. 166, ROOM 208D
City-State-Zip:	TALLAHASSEE FL 32301

Title	CHAIR
Name	DESHA, JOSHUA L
Address	4103 BLIND BROOK COURT
City-State-Zip:	TALLAHASSEE FL 32303

Title	DIRECTOR
Name	LEWIS-BUTLER, MAGGIE
Address	419 MERCURY DRIVE
City-State-Zip:	TALLAHASSEE FL 32305

Title	DIRECTOR
Name	WARREN, LESLIE
Address	1919 CHOWKEEBIN NENE
City-State-Zip:	TALLAHASSEE FL 32301

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I hereby 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 all other like empowered.

SIGNATURE: ANITA BUSHNYAKOVA CFO 06/29/2022

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	CHARROIN, DAVID
Address	1980 CAPITAL CIRCLE NE
City-State-Zip:	TALLAHASSEE FL 32308

Title	CFO
Name	BUSHNYAKOVA, ANITA V.
Address	306 LAURA LEE AVENUE
City-State-Zip:	TALLAHASSEE FL 32301

Title	VICE CHAIR
Name	EDWARDS, TALETHIA
Address	1802 SAXON STREET
City-State-Zip:	TALLAHASSEE FL 32310

Title	CEO
Name	HEIDEL, LAFONDA
Address	306 LAURA LEE AVENUE
City-State-Zip:	TALLAHASSEE FL 32301

Title	DIRECTOR
Name	COHEN, LEONARD
Address	1505 SILVER SADDLE DR
City-State-Zip:	TALLAHASSEE FL 32310

Title	DIRECTOR
Name	POUCHER, TRACI
Address	1511 KILLEARN CENTER BLVD
City-State-Zip:	TALLAHASSEE FL 32309