DOCUMENT# F1100000924

Entity Name: BATTELLE FOR KIDS CORPORATION

Current Principal Place of Business:

1160 DUBLIN RD SUITE 500 COLUMBUS, OH 43215

Current Mailing Address:

1160 DUBLIN RD SUITE 500 COLUMBUS, OH 43215

FEI Number: 31-1781583

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US

Certificate of Status Desired: Yes

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

Officer/Director Detail :

Title	CHAIRMAN	Title	CEO	
Name	AUSTIN, RUSS	Name	GARZA, KAREN	
Address	1160 DUBLIN RD SUITE 500	Address	1160 DUBLIN RD SUITE 500	
City-State-Zip:	COLUMBUS OH 43215	City-State-Zip:	COLUMBUS OH 43215	
Title	C00	Title	CFO	
Name	CYNKAR, PAUL	Name	DAVIS, DONNA	
Address	1160 DUBLIN RD SUITE 500	Address	1160 DUBLIN RD SUITE 500	
City-State-Zip:	COLUMBUS OH 43215	City-State-Zip:	COLUMBUS OH 43215	
Title	DIRECTOR	Title	DIRECTOR	
Title Name	DIRECTOR GONSIOROWSKI, MICHAEL	Title Name	DIRECTOR HILSHEIMER, LAWRENCE	
Name	GONSIOROWSKI, MICHAEL 1160 DUBLIN RD SUITE 500	Name	HILSHEIMER, LAWRENCE	
Name Address	GONSIOROWSKI, MICHAEL 1160 DUBLIN RD SUITE 500	Name Address	HILSHEIMER, LAWRENCE 1160 DUBLIN RD SUITE 500	
Name Address City-State-Zip:	GONSIOROWSKI, MICHAEL 1160 DUBLIN RD SUITE 500 COLUMBUS OH 43215	Name Address City-State-Zip:	HILSHEIMER, LAWRENCE 1160 DUBLIN RD SUITE 500 COLUMBUS OH 43215	
Name Address City-State-Zip: Title	GONSIOROWSKI, MICHAEL 1160 DUBLIN RD SUITE 500 COLUMBUS OH 43215 DIRECTOR	Name Address City-State-Zip: Title	HILSHEIMER, LAWRENCE 1160 DUBLIN RD SUITE 500 COLUMBUS OH 43215 DIRECTOR	
Name Address City-State-Zip: Title Name	GONSIOROWSKI, MICHAEL 1160 DUBLIN RD SUITE 500 COLUMBUS OH 43215 DIRECTOR CELEST, RICHARD 1160 DUBLIN RD SUITE 500	Name Address City-State-Zip: Title Name	HILSHEIMER, LAWRENCE 1160 DUBLIN RD SUITE 500 COLUMBUS OH 43215 DIRECTOR DIXON, MELISA	

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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: DONNA L DAVIS

CFO

01/26/2017 Date

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR	Title	DIRECTOR
Name	STOFF, RICHARD	Name	TAFT, ROBERT
Address	1160 DUBLIN RD SUITE 500	Address	1160 DUBLIN RD SUITE 500
City-State-Zip:	COLUMBUS OH 43215	City-State-Zip:	COLUMBUS OH 43215