FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Apr 01, 2002 8:00 am Secretary of State **DOCUMENT # 720397** 1. Entity Name 04-01-2002 90028 014 ****70.00 FLORENCE FULLER CHILD DEVELOPMENT CENTERS, INC. Principal Place of Business Mailing Address 200 N.E. 14TH ST 200 N.E. 14TH ST **BOCA RATON FL 33432** BOCA RATON FL 33432 2. Principal Place of Business 3. Mailing Address Suite - Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-1312245 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent FELDMAN, JOEL 401 CAMINO GARDENS BLVD **BOCA RATON FL 33432** 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 ed agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees **Department of State** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. VICE-PRESIDENT CR2E037 (9/01) Addition TITLE ☐ Delete TITLE PEGGY HENRY 200 NR 14 TRAVASOS, ALBERT NAME NAME STREET STREET ADDRESS 200 NORTHEAST 14TH STREET STREET ADDRESS **BOCA RATON FL 33432** CITY-ST-ZIP CITY-ST-ZIP SD ☐ Delete TITLE ☐ Change ☐ Addition TITLE taub, Ronna NAME NAME 200 NORTHEAST 14TH STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **BOCA RATON FL 33432** CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition SLOAN, JANELLE NAME NAME 200 NORTHEAST 14TH STREET STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33432** CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition ARDLEIGH, ILA FOX NAME NAME 200 NORTHEAST 14TH STREET STREET ADDRESS STREET ADDRESS CITY-ST-7IP CiTY-ST-ZIP **BOCA RATON FL 33432** ☐ Delete TITLE TITLE ☐ Change ☐ Addition TRIESTE, ALEXANDER J NAME NAME 200 NORTHEAST 14TH STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **BOCA RATON FL 33432** CITY-ST-ZIP ☐ Delete Change Addition HERDEEN, LORRAINE NAME NAME STREET ADDRESS 200 NE 14 ST. STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP **BOCA RATON FL 33432**

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 attact ment with an address, with all other like empowered.