2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

FILED May 05, 2000 8:00 am Secretary of State **DOCUMENT # 747926** 1. Entity Name AT HOME SAFE THE CHILDREN'S PLACE AND CONNOR'S NURSERY, INC. 05-05-2000 90016 021 ****61.25 Principal Place of Business Mailing Address 2309 PONCE DE LEON AVENUE 2309 PONCE DE LEON AVENUE WEST PALM BEACH FL 33407-6025 WEST PALM BEACH FL 33407 951180 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-1935485 Not Applicable \$8.75 Additional Zip Zip Country Country 5. Certificate of Status Desired Fee.Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent James, Elaine Street Address (P.O. Box Number is Not Acceptable) PIERSON, GLORIA 2220 S W 11TH PLACE Ste 1200 Palm Beach Lakes Blud 777 S. FLAGLER DRIVE, STE. 310-E City **BOCA RATON FL 33486** 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 regis 9. Election Campaign Financing Make Check Pavable to **\$5.00** May Be **FILE NOW:** Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. Change Delete TITLE Patrick Rooney Ave, Ste 1400 NAME LANDRY, MICHAEL STREET ADDRESS STREET ADDRESS 629 FLAMINGO DR West Palm Beach FL 33401 CITY-ST-ZIP CITY-ST-7IP FT LAUDERDALE FL **★** Addition ☐ Change **⊠** Delete TITLE TITLE SD David Layman 777 S. Flagler Do Ste 310 East NAME OSTROFF, MICHAEL NAME STREET ADDRESS STREET ADDRESS 7108 FAIRWAY DR STE 235 West Palm Beach FL 3340 CITY-ST-ZIP CITY-ST-ZIP PALM BCH GRDNS FL Past President- D ☐ Addition 🛣 Change TITLE ☐ Delete PIERSON, GLORIA NAME NAME STREET ADDRESS STREET ADDRESS 2220 SW 11TH PLACE CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL** ☐ Delete Change ☐ Addition TITI F NAME NAME BIDEAU, LYNDA STREET ADDRESS STREET ADDRESS 70 DUNBAR ROAD CITY-ST-ZIP CITY-ST-ZIP PALM BCH GRDNS FL ☐ Delete President - D ☐ Addition TITLE NAME MARKE JAMES, ELAINE STREET ADDRESS STREET ADDRESS 1645 PALM BEACH LAKES BLVD, STE 1200 CITY-ST-ZIP CITY-ST-7IP WEST PALM BEACH FL 33401 $\overline{\mathbf{q}}$ Change ☐ Addition TITLE ☐ Delete MULHALL. III JOHN NAME NAME STREET ADDRESS STREET ADDRESS 2600 N MILITARY TRL, 4TH FL CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33431** 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

AND TYPED OR BEINGED AS ELECTION OF SECTION DESCRIPTION

Elaine Johnson James