

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT 1995	 FLORIDA DEPARTMENT OF STATE Sandra E. Morton Secretary of State DIVISION OF CORPORATIONS
---	--

DOCUMENT # F94000005445 (1)

KINDERCARE REAL ESTATE CORP.

APPROVED
AND
FILED
5:11 PM 5/4/95
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Office Address 2400 PRESIDENTS DRIVE MONTGOMERY AL 36116	Mailing Address 2400 PRESIDENTS DRIVE MONTGOMERY AL 36116
--	---

DO NOT WRITE IN THIS SPACE

3. Date incorporated or qualified 10/20/1994		3a. Date of Last Report	
4. FFI Number 63-1120501		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☒		\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
7. This corporation has submitted for filing its tax return in accordance with Florida Statutes ☒ Yes ☐ No			

9. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324				10. Name and Address of New Registered Agent			
81 Name:				82 Street Address (P.O. Box Number is Not Applicable)			
83				84 City			
85 FL				86 Zip Code			

11. I, the undersigned, being a resident of the State of Florida, and being the duly authorized agent of the corporation, do hereby certify that the foregoing is a true and correct statement of the facts and circumstances as to the corporation's compliance with the provisions of Chapter 607, Florida Statutes, and that the corporation is in good standing under the laws of the State of Florida.

SIGNATURE: _____ DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS (IN 12)	
NAME	PD GEARREALD, TULL N JR 2400 PRESIDENTS DRIVE MONTGOMERY AL 36116	NAME	SEE ATTACHED LIST ☐ Change ☐ Addition
NAME	CFOV MASLOW, PHILIP L 2400 PRESIDENTS DRIVE MONTGOMERY AL 36116	NAME	☐ Change ☐ Addition
NAME	D MASLOW, PHILIP L 2400 PRESIDENTS DRIVE MONTGOMERY AL 36116	NAME	☐ Change ☐ Addition
NAME	AS BROCK, PATRICIA A 2400 PRESIDENTS DRIVE MONTGOMERY AL 36116	NAME	☐ Change ☐ Addition
NAME	VC BAILEY, WILLIAM E 2400 PRESIDENTS DRIVE MONTGOMERY AL 36116	NAME	☐ Change ☐ Addition
NAME	TAS HOLLON, JAN R 2400 PRESIDENTS DRIVE MONTGOMERY AL 36116	NAME	☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 607.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 4, 5, or Block 13 of Chapter 607, Florida Statutes, and that my name appears in Block 4, 5, or Block 13 of Chapter 607, Florida Statutes, and that my name appears in Block 4, 5, or Block 13 of Chapter 607, Florida Statutes.

SIGNATURE: *William E. Bailey* **William E. Bailey** **4/27/95** **(334) 277-5090**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 VP/Controller

KinderCare Real Estate Corp.

2400 Presidents Drive
Montgomery, Alabama 36116

FEIN 63-1120601

OFFICER LIST

F94 — 5445

<u>POSITION</u>	<u>NAME & BUSINESS ADDRESS</u>
PRESIDENT	TULL N. GEARREALD, JR. KINDERCARE LEARNING CENTERS, INC. 2400 Presidents Drive Montgomery, Alabama 36116
VICE PRESIDENT/CFO/TREASURER	PHILIP L. MASLOWE KINDERCARE LEARNING CENTERS, INC. 2400 Presidents Drive Montgomery, Alabama 36116
VICE PRESIDENT	DAVID L. HIOTT KINDERCARE LEARNING CENTERS, INC. 2400 Presidents Drive Montgomery, Alabama 36116
VICE PRESIDENT/CONTROLLER	WILLIAM E. BAILEY KINDERCARE LEARNING CENTERS, INC. 2400 Presidents Drive Montgomery, Alabama 36116
VICE PRESIDENT/SECRETARY	REBECCA S. BRYAN KINDERCARE LEARNING CENTERS, INC. 2400 Presidents Drive Montgomery, Alabama 36116
ASSISTANT TREASURER/ASSISTANT SECRETARY	JAN R. HOLLON KINDERCARE LEARNING CENTERS, INC. 2400 Presidents Drive Montgomery, Alabama 36116
ASSISTANT SECRETARY(Real Estate)	PATRICIA A. BROCK KINDERCARE LEARNING CENTERS, INC. 2400 Presidents Drive Montgomery, Alabama 36116

<u>BOARD OF DIRECTORS</u>	<u>BUSINESS ADDRESS</u>
TULL N. GEARREALD, JR.	KINDERCARE LEARNING CENTERS, INC. 2400 Presidents Drive Montgomery, Alabama 36116
PHILIP L. MASLOWE	KINDERCARE LEARNING CENTERS, INC. 2400 Presidents Drive Montgomery, Alabama 36116

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATE
ANNUAL REPORT
1995



DEPARTMENT OF REVENUE
STATE OF CONNECTICUT
Office of the Secretary
Hartford, CT 06103

DOCUMENT # **F94000005923 (7)**

URBAN PROPERTIES OF CONNECTICUT, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

STATE
FLORIDA

2. Principal Office Location C/O CONNECTICUT MUTUAL LIFE INSURANCE 140 GARDEN STREET HARTFORD CT 06154		2a. Mailing Address C/O CONNECTICUT MUTUAL LIFE INSURANCE 140 GARDEN STREET HARTFORD CT 06154		3. Date of Application 11/16/1994		3a. Date of Last Report	
21. State of Incorporation CT		26. Mailing Address CT		4. File Number 06-0867209		Applied For ☐ Not Applicable	
22. State of Principal Office CT		27. State of Mailing Address CT		5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
23. State of Principal Office CT		28. State of Mailing Address CT		6. Election Campaign Financing First Fund Contribution ☐		\$5.00 May Be Added to Fees	
24. State of Principal Office CT		25. State of Mailing Address CT		29. State of Principal Office CT		30. State of Mailing Address CT	
9. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324				10. Name and Address of New Registered Agent			

11. This corporation is organized under the laws of the State of Connecticut. The above named corporation certifies the statement for the purpose of changing its corporate office as required by the laws of the State of Florida. The corporation was authorized by the corporation's board of directors to execute this application as required by the laws of the State of Florida.		12. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324		13. Name and Address of New Registered Agent	
		14. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324		15. Name and Address of New Registered Agent	

11. This corporation is organized under the laws of the State of Connecticut. The above named corporation certifies the statement for the purpose of changing its corporate office as required by the laws of the State of Florida. The corporation was authorized by the corporation's board of directors to execute this application as required by the laws of the State of Florida.

12. Name and Address of Current Registered Agent
**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

12. OFFICERS AND DIRECTORS		13. ADDITIONAL OFFICERS, DIRECTORS, AND OTHER OFFICERS																																					
<table border="1"> <tr> <td>NAME</td> <td>P</td> </tr> <tr> <td>NAME</td> <td>PHELAN, DONALD J</td> </tr> <tr> <td>ADDRESS</td> <td>140 GARDEN STREET HARTFORD CT</td> </tr> <tr> <td>NAME</td> <td>S</td> </tr> <tr> <td>NAME</td> <td>LOMELI, ANN F</td> </tr> <tr> <td>ADDRESS</td> <td>140 GARDEN STREET HARTFORD CT</td> </tr> <tr> <td>NAME</td> <td>D</td> </tr> <tr> <td>NAME</td> <td>MARCUCCILLI, J B</td> </tr> <tr> <td>ADDRESS</td> <td>140 GARDEN STREET HARTFORD CT</td> </tr> <tr> <td>NAME</td> <td>D</td> </tr> <tr> <td>NAME</td> <td>POND JR, DONALD H</td> </tr> <tr> <td>ADDRESS</td> <td>140 GARDEN STREET HARTFORD CT</td> </tr> <tr> <td>NAME</td> <td>D</td> </tr> <tr> <td>NAME</td> <td>SAMS JR, DAVID E</td> </tr> <tr> <td>ADDRESS</td> <td>140 GARDEN STREET HARTFORD CT</td> </tr> </table>		NAME	P	NAME	PHELAN, DONALD J	ADDRESS	140 GARDEN STREET HARTFORD CT	NAME	S	NAME	LOMELI, ANN F	ADDRESS	140 GARDEN STREET HARTFORD CT	NAME	D	NAME	MARCUCCILLI, J B	ADDRESS	140 GARDEN STREET HARTFORD CT	NAME	D	NAME	POND JR, DONALD H	ADDRESS	140 GARDEN STREET HARTFORD CT	NAME	D	NAME	SAMS JR, DAVID E	ADDRESS	140 GARDEN STREET HARTFORD CT	<table border="1"> <tr> <td>NAME</td> <td>T</td> </tr> <tr> <td>NAME</td> <td>WILLIAM D. REHM</td> </tr> <tr> <td>ADDRESS</td> <td>140 GARDEN STREET HARTFORD, CT 06154</td> </tr> </table>		NAME	T	NAME	WILLIAM D. REHM	ADDRESS	140 GARDEN STREET HARTFORD, CT 06154
NAME	P																																						
NAME	PHELAN, DONALD J																																						
ADDRESS	140 GARDEN STREET HARTFORD CT																																						
NAME	S																																						
NAME	LOMELI, ANN F																																						
ADDRESS	140 GARDEN STREET HARTFORD CT																																						
NAME	D																																						
NAME	MARCUCCILLI, J B																																						
ADDRESS	140 GARDEN STREET HARTFORD CT																																						
NAME	D																																						
NAME	POND JR, DONALD H																																						
ADDRESS	140 GARDEN STREET HARTFORD CT																																						
NAME	D																																						
NAME	SAMS JR, DAVID E																																						
ADDRESS	140 GARDEN STREET HARTFORD CT																																						
NAME	T																																						
NAME	WILLIAM D. REHM																																						
ADDRESS	140 GARDEN STREET HARTFORD, CT 06154																																						

14. I, the undersigned, certify that the information supplied with this filing is complete, true and correct, and that the corporation is in good standing with the State of Connecticut. I am a duly qualified person to execute this application as required by the laws of the State of Florida. I am a duly qualified person to execute this application as required by the laws of the State of Florida.

SIGNATURE: **WILLIAM D. REHM** *William D. Rehm* **4/25/95** (203) 987-6500
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR