SECOND NOTICE; CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT **CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # F9700003515 (0)

## **FILED** Sep 03 1998 8:00am Secretary of State

1727 PENNSTLVANA AVE. N.W. #1000 WASHINGTON DC 20006  170 PENNSTLVANA AVE. N.W. #1000 WASHINGTON DC 20006  170 PENNSTLVANA AVE. N.W. #1000  2. Principal Place of Business 22. Mailing Address 28. The Mailing Address 29. D Box 1 3 68 29. D Box 1 3 68 20 PD Box 1	KIDS MI	ssing in America, inc.	Malling Address					
2_ Principal Piece of Business   2_ A Mailing Address   70 Box 1368   5. Certificate of Statutus Desired   \$\$8.75. Additional Press (P.O. Box 1368   5. Certificate of Statutus Desired   \$\$8.75. Additional Press (P.O. Box 1368   5. Certificate of Statutus Desired   \$\$8.75. Additional Press (P.O. Box 1368   5. Certificate of Statutus Desired   \$\$5.00 May 95 B. This Comparation of the press (P.O. Box 1368   5. Certificate of Statutus Desired   \$\$5.00 May 95 B. This Comparation over on the press (P.O. Box Number is Not Acceptable)   \$\$5.00 May 95 B. This Comparation over on the press of the press (P.O. Box Number is Not Acceptable)   \$\$5.00 May 95 B. This Comparation over on the press of the press (P.O. Box Number is Not Acceptable)   \$\$5.00 May 95 B. This Comparation over on the press (P.O. Box Number is Not Acceptable)   \$\$5.00 May 95 B. This Comparation over on the press (P.O. Box Number is Not Acceptable)   \$\$5.00 May 95 B. This Comparation over on the presidence of certain part of the press (P.O. Box Number is Not Acceptable)   \$\$5.00 May 95 B. This Comparation over on the presidence of certain part of the purpose of certain part of the purpose of the purpose of certain part of the purpose of the purpose of certain part of the componition submitted by the comparation of derivation of the purpose of certain part of the componition submitted by the comparation of derivation of the purpose of the presidence of the purpose of the pur					#100	0	07/07/1997	
Sulfo, Apt. 4. etc.    20								e
Sulto, Apt. #, etc.  23   23   27   7. Is this nonprofit corporation approximately personal property. Sci. 10 May be Added to Fees City & State  25   26   27   28   3. Is Country  27   29   29   24   20   4 - 13 68   30   2   2   2   2   2   2   2   2   2								
City & State    City & State   23	Suite, Apt. #, etc.   Suite, Apt. #, etc.			·				
25   Country   25   28   49 2 0 4 - 1 36 8   30     Country   Personal Property Tax due June 30.     Yes   Non/A	City & State City & State			т			7. Is this nonprofit corporation a homeowners association?	7
S. Name and Address of Current Registered Agent    10. Name and Address of New Registered Agent	Zip	Country Zip Co			intry		8. This corporation owes or has paid the current year Intangible	
NRAI SERVICES, INC. 526 E. PARK AVE. TALLAHASSEE FI. 32301  4 City  FL  4 City  FL  85 Zip Code  11. Pursuant to the provisions of sections \$17,0502 and \$17,1508, Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florids. Such change was suithorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and both appointment as registered agent agent, and appointment as registered agent, and both appointment as registered agent, and appointment as registered agent, and both appointment as registered agent, and appointment as appointment as registered agent, and appointment as registered agent, and appointment as registered agent, and appointment appoint appointment as registered agent appointment as registered agen	24	<del> </del>	<u></u>	1001	T			7
528 E. PARK AVE. TALLAHASSEE FL 32301  44 City  FL  83  44 City  FL  85 Zip Code  11. Pursuant to the provisions of sections 617,0502 and 617,1508. Florids Statufes, the above-named corporation's board of directors. I hereby eccept the appointment as registered agent. and accept the obligations of, section 617,0503, Plorids Statufes.  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  ITTLE  PD  CURRY, KENNETH E  11. TITLE  PD  CURRY, KENNETH E  12. NAME  CURRY, KENNETH E  12. NAME  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  14. CURRY, KENNETH E  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  14. CURRY, KENNETH E  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  16. Change Addition  Addition  17. TITLE  VD  DELETE  21. TITLE  VD  DELETE  21. TITLE  VD  DELETE  22. NAME  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  22. NAME  3.15 STREET ADDRESS  CITYST 2P  WASHINGTON DC 20006  TAY PENNSYLVANIA AVE., N.W., #1000  ASSHINGTON DC 20006  TAY PENNSYLVANIA AVE., N.W., #1000  ASSHINGTON DC 20006  TAY PENNSYLVANIA AVE., N.W., #1000  ASSHINGTON DC 20006  TITLE  TAY PENNSYLVANIA AVE., N.W., #1000  ASSHINGTON DC 20006  TITLE  TAY PENNSYLVANIA AVE., N.W., #1000  ASSHINGTON DC 20006  ASSTREET ADDRESS  TAY PENNSYLVANIA AVE., N.W., #1000					81	Name		
TALLAHASSEE FL 32301  11. Pursuant to the provisions of sections 517,0502 and 517,1508, Florida Statufas, the devo-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was suthorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and the corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was suthorized by the corporation's board of directors. I hereby accept the appointment as registered agent and site is spiciable.    SIGNATURE					82	Street Address (P.O. Box Number is Not Acceptable)		
11. Pursuant to the provisions of sections 617.0502 and 617.1508. Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered epent, or both, in the State of Florida. Such change was euthorized by the corporation's board of directors. I hereby accept the appointment as registered agant. Lam familiar with, and accept the obligations of, section 617.0503, Florida Statutes.  SIGNATURE    Signature   Technique   T					83			
office or registated agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registated agent, in the familiar with, and accept the obligations of, section 817,605, Florida Statutory.    Signature   State					84	City	FL 85 Zip Code	7
12	office or re agent. I ar	arietered ecent or both in the State of	Florida, Such change was at	thorized	hv fr	amed corporation	ration submits this statement for the purpose of changing its registered on's board of directors. I hereby accept the appointment as registered	
TITLE	Ololly (Torke				red Ag	ent signature re		ے!
NAME   CURRY, KENNETH   E   12 NAME   13 STREET ADDRESS   1747 PENNSYLVANIA AVE., N.W., \$1000   13 STREET ADDRESS   1747 PENNSYLVANIA AVE., N.W., \$1000   22 NAME   22 NAME   22 NAME   22 NAME   22 NAME   23 STREET ADDRESS   1747 PENNSYLVANIA AVE., N.W., \$1000   23 STREET ADDRESS   1747 PENNSYLVANIA AVE., N.W., \$1000   24 CITY-ST-ZIP   27 ADDRESS   1747 PENNSYLVANIA AVE., N.W., \$1000   33 STREET ADDRESS   1747 PENNSYLVANIA AVE., N.W., \$1000   33 STREET ADDRESS   1747 PENNSYLVANIA AVE., N.W., \$1000   34 CITY-ST-ZIP   1747 PENNSYLVANIA AVE., N.W., \$1000   42 NAME   43 STREET ADDRESS   1747 PENNSYLVANIA AVE., N.W., \$1000   44 CITY-ST-ZIP   1747 PENNSYLVANIA AVE., N.W., \$1000   44 CITY-ST-ZIP   1747 PENNSYLVANIA AVE., N.W., \$1000   44 CITY-ST-ZIP   1747 PENNSYLVANIA AVE., N.W., \$1000   53 STREET ADDRESS   1747 PENNSYLVANIA AVE., N.W., \$1000   53 STREET ADDRESS   1747 PENNSYLVANIA AVE., N.W., \$1000   54 CITY-ST-ZIP   65 NAME   55 NAME								{
TITLE	TITLE						Change Additio	n L
CITY-ST-ZIP	<b>.</b>							
TITLE							•	Įį
NAME   STREET ADDRESS   1747 PENNSYLVANIA AVE., N.W., #1000   23 STREET ADDRESS   24 CITYST-ZIP				_		-ZIP		$\dashv 8$
STREET ADDRESS   1747 PENNSYLVANIA AVE., N.W., #1000   2.3 STREET ADDRESS   2.4 CITY-ST-ZIP		, <del>-</del>	☐ DEFE1₽				CI Change CI Addiso	<sup>n</sup>
CITY-ST-ZIP						ANNESS		ļ
TITLE STD DELETE 3.1 TITLE								
TAYLOR, JERRY L   32 NAME   33 STREET ADDRESS   1747 PENNSYLVANIA AVE., N.W., #1000   34 CITY-ST-ZIP						·	Change Addition	
STREET ADDRESS				3.2 N	AME		i	"
CITY-ST-ZIP					TREET	ADORESS		
DELETE   S			, , , , , , , , , , , , , , , , , , ,	3.4 C	ITY-ST	-ZIP		
NAME   STREET ADDRESS   1747   PENNSYLVANIA AVE., N.W., \$1000   4.3 STREET ADDRESS   WASHINGTON DC 20006   4.4 CITY-ST-ZIP							Change Addition	n
STREET ADDRESS   1747 PENNSYLVANIA AVE., N.W., #1000   43 STREET ADDRESS   44 CITY-ST-ZIP	NAME			4.2 N	AME		<del></del>	
CITY-ST-ZIP         WASHINGTON DC 20006         4.4 CITY-ST-ZIP           TITLE         T         DELETE         5.1 TITLE         Change         Addition           NAME         SMITH, ROSEMARY         52 NAME	STREET ADDRESS			4.3 \$1	TREET	ADDRESS		
NAME   SMITH, ROSEMARY   52 NAME	CITY-ST-ZIP			4.4 CITY-5		-ZIP		_
STREET ADDRESS         1747 PENNSYLVANIA AVE., N.W., \$1000         5.3 STREET ADDRESS           CITY-ST-ZIP         WASHINGTON DC 20006         5.4 CITY-ST-ZIP           TITLE         DELETE         6.1 TITLE           NAME         6.2 NAME           STREET ADDRESS         6.3 STREET ADDRESS           CITY-ST-ZIP         6.4 CITY-ST-ZIP	TITLE	T	DELETE	5.1 TI	TLE		Change Addition	n
STREET ADDRESS         1747 PENNSYLVANIA AVE., N.W., \$1000         5.3 STREET ADDRESS           CITY-ST-ZIP         WASHINGTON DC 20006         5.4 CITY-ST-ZIP           TITLE         DELETE         6.1 TITLE           NAME         6.2 NAME           STREET ADDRESS         6.3 STREET ADDRESS           CITY-ST-ZIP         6.4 CITY-ST-ZIP	NAME	SMITH, ROSEMARY	•	5.2 N	AME			
TITLE DELETE 6.1 TITLE Change Addition  NAME 62 NAME 63 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP	STREET ADDRESS		V., #1000	5.3 ST	TREET	ADDRESS		
NAME 62 NAME STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP	CITY-ST-ZIP	WASHINGTON DC 20006				-ZIP		4
STREET ADDRESS  CITY-ST-ZIP  6.3 STREET ADDRESS  6.4 CITY-ST-ZIP	TITLE						Change Additio	n
CITY-ST-ZIP 6.4 CITY-ST-ZIP	NAME							
	1					ľ		
THE A PRICARY PROPERTY THE INTOMORIAN PURPOSE WITH THE WITH GOOD DOLD HIGHER THE PARTY FOR THE PARTY PARTY FOR THE		artifut that the information according with	this filing does not qualify for				action 119 07/3VI) Florida Statutes   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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: By:

Jerry L. Taylor, Sec. 8/21/98 517-764-2811