## **2003 FOR PROFIT CORPORATION**

## **UNIFORM BUSINESS REPORT (UBR)** H84869 DOCUMENT #

FOR KIDS ONLY OF PENSAG			
Principal Place of Business % NEELTJE W. MCNULTY 321 S.PALAFOX STREET PENSACOLA FL 32501	Mailing Address % NEELTJE W. MCNULTY 321 S.PALAFOX STREET PENSACOLA FL 32501		
2. Principal Place of Business	3. Mailing Address		
Suite, Apt. #, etc.	Suite, Apt. #, etc.	<del></del>	

## **FILED** Apr 18, 2003 8:00 am Secretary of State

04-18-2003 90155 038 \*\*\*150.00

% NEELTJE V 321 S.PALAFO PENSACOLA I	ncipal Piace of Business  NEELTJE W. MCNULTY  S.PALAFOX STREET  NSACOLA FL 32501  Mailing Address  NEELTJE W. MCNULTY  321 S.PALAFOX STREET  PENSACOLA FL 32501								
2. Principal Place of Business		3. Mailing Address				PI (	B)1 0191 <del>)</del> 1081		
Suite, Apt. #, etc,		Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES			
City & State		City & State		<b>4.</b> F	4. FEI Number 59-2623702		plied For t Applicable		
Zip 	Country	Zip	Counti		5. (	Certificate of Status Desired	.75 Add Required	itional t	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent						
MONUMETY	AICELTIC M			Name 7		-			
MCNULTY, NEELTJE W. 1002 NORTH BAYLEN ST			1	Street Address (P.O. Box Number is Not Acceptable)					
PENSACO	LA FL 32501								
				City		FL	Zip Code		
	named entity submits this statement for ions of registered agent.	or the purpose of changing its	s registere	ed office or regis	stered ag	ent, or both, in the State of Florida. I am fam	iliar with, a	and accept	
SIGNATURE  Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE									
After	ILE NOW!!! FEE IS \$150.00 May 1, 2003 Fee will be \$550.00 Payable to Florida Department o	f State				9. Election Campaign Financing Trust Fund Contribution.	\$5.00 Added	May Be to Fees	
10.	OFFICERS AND	DIRECTORS	11.		AD	DITIONS/CHANGES TO OFFICERS AND DI	RECTORS	IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT MCNULTY, JACK 1002 N. BAYLEN ST PENSACOLA FL	☐ Delete					] Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCNULTY, NEELTJE W. 1002 N. BAYLEN ST PENSACOLA FL	☐ Celete					Change	Addition	
TITLE NAME STREET ADDRESS : CITY-ST-ZIP		Delete				= -	Change	Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	ortification the left-residence in the left-	Delete	CITY-	ET ADDRESS ST-ZIP	Continu	119 07/2Vi) Florida Statutas I further certify	Change	Addition	

indicated on this report or supplemental report is trye 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 10 or Block 11 if changed, or on an anatomen with an address with all other like empowered.

SIGNATURE: