2000 UNIFORM BUSINESS REPORT (UBR) 7/12/00-90005-015-\$150.00-\$150.00 ĐOCUMENT # L32553 1. Entity Name FILED CHILD GROWTH AND DEVELOPMENT, INCORPORATED --- NE STATE nn SFP -5 AM 9: 06 Mailing Address Principal Place of Business SECRETARY OF STATE. 2428 HARTSFIELD RD. TATE OF CHARGE PLORIDA 2428 HARTSFIELD RD. TALLAHASSEE FL 32303-3314 TALLAHASSEE FL 32303 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State Applied For City & State 4. FEI Number 59-2981096 Not Applicable \$8.75 Additional Country ZiD Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name FONTENOT, LEYSHIA A Street Address (P.O. Box Number is Not Acceptable) 2428 HARTSFIELD RD TALLAHASSEE FL 32303 Zip Code City 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 registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. PTS ☐ Addition TITLE ☐ Delete TITLE FONTENOT, LEYSHIA A NAME NAME STREET ADDRESS STREET ADDRESS 2428 HARTSFIELD RD. CITY-ST-ZIP CITY-ST-ZIP TALLAHASSEE FL 32303 ☐ Change ☐ Addition TITLE ☐ Delete FONTENOT, ROMAN E NAME NAME STREET ADDRESS STREET ADDRESS 2428 HARTSFIELD RD. CITY-ST-ZIP TALL'AHASSEE FL 32303 CITY-ST-7IP ☐ Delete Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CRY-SI-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 13. Libereby 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered. SIGNATURE:

CHILD GROWTH & DEVELOPMENT, INC. 2428 HARTSFIELD ROAD TALLAHASSEE, FLORIDA 32303 (850) 385-2258

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JUNE 27, 2000

DIVISION OF CORPORATIONS
_UNIFORM BUSINESS REPORT FILINGS____
P.O. BOX 1500
TALLAHASSEE, FLORIDA 32302-1500

TO WHOM IT MAY CONCERN:

PLEASE BE ADVISED THAT WE HAVE JUST RECEIVED AN APPLICATION FOR FILING THE ANNUAL REPORT FOR THE CURRENT YEAR. WE HAVE CONTACTED THE OFFICE AND INFORMED THEM THAT WE HAVE JUST RECIEVED THE PRE-PRINTED FORM IN THE MAIL AND WE WERE TOLD TO SUBMIT A LETTER TO THIS OFFICE WITH THE FORM AND OUR CHECK FOR \$ 150.00.

ENCLOSED PLEASE FIND OUR FILING FEE IN THE AMOUNT OF \$150.00.

THANK YOU FOR YOUR COOPERATION.

VERY TRULY YOURS,

LEYSHIA FONTENOT PRESIDENT