## 2002 UNIFORM BUSINESS REPORT (UBR)

## Jan 31, 2002 8:00 am Secretary of State DOCUMENT # M28818 1. Entity Name 01-31-2002 90050 050 \*\*\*150.00 ACADEMY FOR LITTLE PEOPLE OF WEST PALM BEACH, IN C. Principal Place of Business Mailing Address 4639 N MILITARY TRAIL 4639 N MILITARY TRAIL W PALM BCH. FL 33409-7808 W PALM BCH. FL 33409-7808 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 59-2716282 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent KINGCADE, THOMAS E Street Address (P.O. Box Number is Not Acceptable) 209 S OLIVE AVE WEST PALM BEACH FL 33401 Zip Code 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 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. (9/01) TITLE ☐ Delete TITI F ☐ Change ☐ Addition NAME ROLLINS, NANCY C. NAME CR2E034 35 WINDSON LANE STREET ADDRESS STREET ADDRESS PALM BCH GRDNS FL CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME BRUCE, MITCHELL G JR. NAME STREET ADDRESS 35 WINDSON LANE STREET ADDRESS CITY-ST-ZIP PALM BCH GRDNS FL CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME ROLLINS, NANCY, C .... NAME -STREET ADDRESS STREET ADDRESS 35 WINDSON LANE CITY-ST-ZIP PALM BCH GRDNS FL CITY-ST-ZIP TITLE TITLE ☐ Delete Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address,

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR

HHachment #M28818

THOMAS E. KINGCADE, P.A.

209 SOUTH OLIVE AVENUE

WEST PALM BEACH, FLORIDA 33401

303651

THOMAS E. KINGCADE
FLORIDA BAR BOARD CERTIFIED
CIVIL TRIAL LAWYER
FLORIDA BAR BOARD CERTIFIED
BUSINESS LITIGATION
FLORIDA BAR BOARD CERTIFIED
MEDIATOR

(561) 659-7300 1-800-869-9409 FAX (561) 655-1593 www.lawyers.com/kingcade tekingcade@aol.com

January 16, 2002

Division of Corporations Uniform Business Report Filings P. O. Box 1500 Tallahassee, FL 32302-1500

Re: Academy for Little People of

West Palm Beach, Inc Document No. M28818

## Gentlemen:

Enclosed find 2002 Uniform business Report (UBR) for the above-named corporation.

Also find enclosed check in the amount of \$150.00 for the fee.

Very truly yours,

Thomas E Kingcade

/ml encl.