

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N00000001012

FILED
Apr 29, 2003
Secretary of State

Entity Name: BEST INTERESTS OF OUR PARENTS AND KIDS TOGETHER, INC.

Current Principal Place of Business:

16394 EAST GLASGOW DR.
LOXAHATCHEE, FL 33470

New Principal Place of Business:

Current Mailing Address:

16394 EAST GLASGOW DR.
LOXAHATCHEE, FL 33470

New Mailing Address:

PO BOX 21693
WEST PALM BEACH, FL 33416

FEI Number: 65-1004491

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BERRY, KELLY
16394 EAST GLASGOW DR.
LOXAHATCHEE, FL 33470

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: COED () Delete
Name: BERRY, KELLY
Address: 16394 EAST GLASGOW DRIVE
City-St-Zip: LOXAHATCHEE, FL 33470

Title: COED () Delete
Name: DASCOTT, LEE ELLEN
Address: 4747 PINEMORE LANE
City-St-Zip: LAKE WORTH, FL 33463

Title: C () Delete
Name: FRECHETTE, GARY CHIEF
Address: PPD, 171 1/2 NORTH LAKE AVENUE
City-St-Zip: PAHOKEE, FL 33476

Title: T () Delete
Name: PAYNE, MICHAEL REV.
Address: 306 ONTARIO PLACE
City-St-Zip: WEST PALM BEACH, FL 33407

Title: S () Delete
Name: KNAPP, ALICE
Address: 4280 MARILYN DRIVE
City-St-Zip: LAKE WORTH, FL 33461

Title: D () Delete
Name: COLLINS, JAMES
Address: 16064 EAST BRIGHTON
City-St-Zip: LOXAHATCHEE, FL 33470

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LEE ELLEN DASCOTT

COED

04/29/2003

Electronic Signature of Signing Officer or Director

Date