

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N00000004544

FILED
Jan 06, 2002
Secretary of State

Entity Name: KIDS ACHIEVE, INC.

Current Principal Place of Business:

10911 BONITA BEACH ROAD
STE 1041
BONITA SPRINGS, FL

New Principal Place of Business:

10911 BONITA BEACH ROAD
STE 1041
BONITA SPRINGS, FL 34135 US

Current Mailing Address:

10911 BONITA BEACH ROAD
STE 1041
BONITA SPRINGS, FL

New Mailing Address:

10911 BONITA BEACH ROAD
STE 1041
BONITA SPRINGS, FL 34135 US

FEI Number: 59-3668015

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHUMANN, RAYMOND L ESQ
13141 MCGREGOR BLVD STE 9
FT MYERS, FL 33919 US

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: DP () Delete
Name: LINDNER, BARBARA H
Address: 10911 BONITA BEACH RD STE 1041
City-St-Zip: BONITA SPRINGS, FL 34135

Title: DV () Delete
Name: LINDNER, MARK L
Address: 10911 BONITA BEACH RD STE 1041
City-St-Zip: BONITA SPRINGS, FL 34135

Title: DS () Delete
Name: HUNTER, KATHERYN
Address: 10911 BONITA BEACH RD STE 1041
City-St-Zip: BONITA SPRINGS, FL 34135

Title: D () Delete
Name: SCANLIN, SUSAN
Address: 10911 BONITA BEACH RD STE 1041
City-St-Zip: BONITA SPRINGS, FL 34135

Title: D () Delete
Name: HIIRONEN, SANDRA
Address: 10911 BONITA BEACH ROAD STE 1061
City-St-Zip: BONITA SPRINGS, FL 34135

Title: D () Delete
Name: NEWLAND, KATHLEEN
Address: 10911 BONITA BEACH RD STE 1041
City-St-Zip: BONITA SPRINGS, FL 34135

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: BARBARA H. LINDNER

DP

01/06/2002

Electronic Signature of Signing Officer or Director

Date