2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N00374

Entity Name: KIDS INTERNATIONAL DONORS SOCIETY (K.I.D.S.), INC.

Apr 17, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business:

217 CARIBBEAN RD

PALM BEACH, FL 33480

New Mailing Address: Current Mailing Address:

217 CARIBBEAN ROAD

PALM BEACH, FL 33480 US

FEI Number: 59-2358942 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

NIXON, GRIFFIS NIXON, GRIFFIS S PD 217 CÁRIBBEAN ROAD 217 CÁRIBBEAN ROAD US PALM BEACH, FL 33480 US PALM BEACH, FL 33480

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: NIXON S. GRIFFIS 04/17/2002

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

ZULLO, KATHRYN, ZULLO, KATHRYN DT Name: Name:

17 BERWICK RD. Address: 17 BERWICK RD. Address: City-St-Zip: PALM BCH GARDENS, FL City-St-Zip: PALM BCH GARDENS, FL 33418 US

Title: PD () Delete Title: (X) Change () Addition

GRIFFIS, NICK, Name: GRIFFIS, NIXON S PD Name: Address: 217 CARIBBEAN ROAD Address: 217 CARIBBEAN ROAD

City-St-Zip: PALM BEACH, FL City-St-Zip: PALM BEACH, FL 33480 US

Title: () Delete Title: (X) Change () Addition

HAGLUND, DAVE D HAGLUND, DAVE, Name: Name: 1601 GEORGIA AVENUE Address: 1601 GEORGIA AVENUE Address: City-St-Zip: W. PALM BEACH, FL City-St-Zip: W. PALM BEACH, FL 33405 US

(X) Change () Addition Title: DS () Delete Title: DS

Name: ZULLO, ALLAN, Name: ZULLO, ALLAN DS 17 BERWICK RD. Address: 17 BERWICK RD. Address: PALM BCH GARDENS, FL 33418 US PALM BCH GARDENS, FL

City-St-Zip: City-St-Zip:

Title: () Delete Title: (X) Change () Addition MORTON, NACY MORTON, NACY D Name: Name:

7373 E. IOWA 7373 E. IOWA Address: Address: DENVER, CO 80231 City-St-Zip: City-St-Zip: DENVER, CO 80231 US

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: NIXON S. GRIFFIS PD 04/17/2002