2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N01000002507

1. Entity Name

RAWLS KIDDIE KASTLE, INC

FILED
02 SEP 19 AM 11:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

Principal Place of Business
519 W. 19th St.
Jax FL 32206

Mailing Address

2. Principal Place of Business
2452 W. 28th St.
Suite, Apt. #, etc.

City & State: Jacksonville, Florida
Zip: 32209
Country: US

3. Mailing Address
2452 W. 28th St.
Suite, Apt. #, etc.

City & State: Jacksonville, Florida
Zip: 32209
Country: US

4. FEI Number: 59-3714721
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

Deborah Rawls
2452 W. 28th Street
Jacksonville, FL 32209

7. Name and Address of New Registered Agent

Name: Deborah Rawls
Street Address (P.O. Box Number is Not Acceptable): 2452 W. 28th St.
City: Jacksonville FL Zip Code: 32209

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Deborah A. Rawls DATE: 9/13/02
Signature, typed or printed name of registered agent and title if applicable. ☐ Delete (NOTE: Registered Agent signature required when reinstating)

After September 13, 2002, min. will be $236.25

9. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President Deborah A. Rawls 2452 W. 28th St. Jacksonville, FL 32209	☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary Sharee-Armstrong-Brown 2452 W. 28th St. Jacksonville, FL 32209	☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Treasurer Antoine Brown 2452 W. 28th St. Jacksonville, FL 32209	☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	700007979707--5 -09/24/02--01030--015 *****61.25 *****61.25	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Deborah A. Rawls 9/13/02 354-2640
Date Daytime Phone #