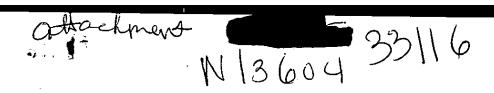
## 2002 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # N13604

## FILED May 30, 2002 8:00 am Secretary of State

SHARING CONCERN FOR SEMINOLE COUNTY SHELTER CHILDRENG PROPERTY AND WINDSOR AVE LONGWOOD FL 32750  100 WINDSOR AVE LONGWOOD FL 32750  State Apt 6 etc.	1. Enlity Nam		<b>T</b>				04-18-2002 9043	3 033 **	·**61.25	
1400 WINDSOR AVE   LONGWOOD F1 32750   LONGWOOD F2 32750   LONGW	DREN, INC.					)				
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Delay   Country   Zp   Country   S. Certificate of Status Desired   S.S. Additional   Rep Required   Rep Rep Required   Rep Required   Rep	Suite, Apt.	#, etc.	Suite, Apt. #, etc.		<del></del>		DO NOT WRITE IN THIS SE	PACE		
S. Name and Address of Current Registered Agent  7. Name and Address of New Registered Agent  NAME  Street Address (P.O. Size Number is Not Acceptable)  Street Address (P.O. Size Number is Not Acceptable)  Street Address (P.O. Size Number is Not Acceptable)  City FL 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 Fordia.  SIGNATURE  Signature types or purson rame of registered sport and the purpose of changing its registered office or registered agent, or both, in the state of Fordia.  SIGNATURE  Signature types or purson rame of registered sport and the purpose of changing its registered office or registered agent, or both, in the state of Fordia.  SIGNATURE  Signature types or purson rame of registered sport and the purpose of changing its registered office or registered agent, or both, in the state of Fordia.  SIGNATURE  Signature types or purson rame of registered sport and the purpose of changing its registered office or registered agent, or both, in the state of Fordia.  SIGNATURE  SIGNATURE  Signature types or purson rame of registered sport and the purpose of changing its registered office or registered agent, or both, in the state of Fordia.  SIGNATURE  Signature types or purson rame of registered sport and the purpose of changing its registered office or registered agent, or both, in the state of Fordia.  SIGNATURE  Signature types or purson rame of registered sport and the purpose of changing its registered office or registered agent, or both, in the state of Fordia.  SIGNATURE  Signature types or purpose or purson rame of registered office or registered agent, or both, in the state of Fordia.  SIGNATURE  Signature types or purpose or p	City & State		City & State			FO 0070000				}
LEFFLER, KENNETH M 1400 WINDSQR AVENUE LONGWOOD FL 32750  8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the state of Forida.  SIGNATURE  SIGNATU	Zip Country		Zip (							
LEFFLER, KENNETH M 1400 WINDSQR AVENUE LONGWOOD FL 32750  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, however purses name of registered agent and the statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.    SIGNATURE   Signature, however purses name of registered agent and the statement required when reference)	·	6. Name and Address of Curre	nt Registered Agent			7. Name and Add:	ess of New Registered Ag	елt		1
ECITY FL ZIP Code  E. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the state of Fords.  SIGNATURE    Signature					_Name				ي محمد	-
ELONGWOOD FL 32750  City FL 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 Fords.  SIGNATURE    Signature   Signat				Street Address (P.O. Box Number is Not Acceptable)						
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, ligned or pursed name of ingitatered agent and the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  FILE NOW: FEE IS \$61.25  9. Election Campaign Financing								1		
SIGNATURE    Signature, hybric or printed name of registered again and 276 if applicable. (NOTE: Registered Again signature requests when reference)   PILE NOW: FEE IS \$61.25			City			FL	Zip Cod	e		
FILE NOW: FEE IS \$61.25  8. Election Campaign Financing	8. The above	named entity submits this statemen	t for the purpose of changing i	ts registere	d office or registe	red agent, or both, in t	the state of Florida.			ļ
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FILE NOW: FEE IS \$61.25  9. Election Campaign Financing	SIGNATURE .	Signature, typed or printed pame of registered as	ent and title if applicable. (NC	)TE: Registered	i Agent signature require	d when reinstating)	DATE		<del></del>	
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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 if changed, or on an attachment with an address with all other like empowered.



SC3

Sharing Concern for Seminole County Shelter Children, Inc. 1400 Windsor Avenue Longwood, Florida 32750-6830

May 14, 2002

Florida Department of State Division of Corporations— Post Office Box 6327 Tallahassee, FL 32314

Re: Sharing Concern for Seminole County Shelter Children, Inc. N13604

Dear Sir or Madam:

This letter is in reply to your recent notice of non-filing of annual report for failure to list a minimum of three directors. Arthur E. Grindle was listed in our earlier filing as no longer being a director. This was done in error. Please correct our report to reflect that Arthur E. Grindle remains in good standing as Vice-President and one of three Directors of Sharing Concern for Seminole County Shelter Children, Inc.

Corrections have been made to the copy of our annual report attached to your notice of non-filing. If this letter and the corrected copy of annual report is insufficient to effect needed correction, please mail us a new form (or perhaps we can download a new form on the internet) or otherwise advise what must be done to satisfy requirement of the Division.

\_ Yours truly,

Kenneth M. Leffler,

President