

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N92000000692

1. Entity Name

FOR THE KIDS INTERNATIONAL, INCORPORATED

FILED

Apr 13, 2001 8:00 am
Secretary of State

04-13-2001 90082 006 ****61.25

Principal Place of Business

Mailing Address

~~ROUTE 3, BOX 136~~
~~APPOMATTOX VA 24522~~
~~US~~

~~ROUTE 3, BOX 136~~
~~APPOMATTOX VA 24522~~
~~US~~

2. Principal Place of Business

P.O. Box 4020

3. Mailing Address

P.O. Box 4020

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Cleveland, TN.

City & State

Cleveland, TN.

Zip

37320

Country

USA

Zip

37320

Country

USA

4. FEI Number

59-3235594

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LINKOUS, J. JUANELL
9012 COPELAND ROAD
TAMPA FL 33637-5102

Name

Street Address (P.O. Box 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 Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PDCH
HUGHES, JAMES R JR
~~ROUTE 3, BOX 136~~ P.O. Box 4020
~~APPOMATTOX VA 24522~~ Cleveland, TN. 37320

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DST
HUGHES, JOYCE R
~~ROUTE 3, BOX 136~~ P.O. Box 4020
~~APPOMATTOX VA 24522~~ Cleveland, TN. 37320

☐ Delete

TITLE
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CITY-ST-ZIP
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LINKOUS, J. JUANELL
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TAMPA FL 33637-5102

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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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

James R. Hughes, Jr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/9/01
Date

703-989-8512
Daytime Phone #

CR2E037 (10/00)