

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997
AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N93000004362 (0)

1. Corporation Name

Y.E.S. KIDS, INC.

Principal Place of Business

Mailing Address

1206 SOUTH US 41
SARASOTA FL 34239
US

2023 LAUREL ST
SARASOTA FL 34237



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 09/28/1993 3a. Date of Last Report 05/01/1996

4. FEI Number 65-0438437 Applied For Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

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

8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25 26 27 28 29 30 9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ROBINSON, WILLIAM W
2023 LAUREL ST
SARASOTA FL 34237

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE William Woodson Robinson /P/D/ 7/20/97
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE D/P ROBINSON, WILLIAM W
NAME 2023 LAUREL ST
STREET ADDRESS SARASOTA FL 34237
CITY-ST-ZIP

TITLE D MILLER, MARY J
NAME 2485 MAIN ST
STREET ADDRESS SARASOTA FL 34237
CITY-ST-ZIP

TITLE D RANDELL, JUNE T
NAME 2485 MAIN ST
STREET ADDRESS SARASOTA FL 34237
CITY-ST-ZIP

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE V/D ELLEN R. HOWARD
1.2 NAME 2704 BEE RIDGE RD.
1.3 STREET ADDRESS SARASOTA, FL 34240
1.4 CITY-ST-ZIP

2.1 TITLE S/T/D AUNDRIA SHOOTES
2.2 NAME 5040 SILK OAK DR.
2.3 STREET ADDRESS SARASOTA, FL 34232
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: WILLIAM WOODSON ROBINSON /P/D/ 7/20/97

CR2E037 (4/97)