## 2002 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# N95000005822

Entity Name: KICKIN' FOR KIDS, INC.

Mar 28, 2002 8:00 AM Secretary of State

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

5830 MEMORIAL HWY #414

TAMPA, FL 33615

**New Mailing Address: Current Mailing Address:** 

P O BOX 3125 P O BOX 3125

SUITE 900 CLEARWATER, FL 33767 US CLEARWATER, FL 34630 US

FEI Number: 59-3356183 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

GRANT, MARLA D GRANT, MARLA D

5830 MÉMORIAL HWY #414 5830 MÉMORIAL HWY #414 TAMPA, FL 33615 #1602

TAMPA, FL 33615

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: 03/28/2002

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

( ) Delete PTD () Change () Addition

GRANT, MARLA D Name: Name: Address: 5830 MEMORIAL HWY #414 Address:

City-St-Zip: TAMPA, FL 33615 City-St-Zip:

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

Name: CALHOUN, BRENNAN Name: CALHOUN, BRENNAN K Address: 1635 FLAGSTONE CT Address: 5830 MEMORIAL HIGHWAY # 414

City-St-Zip: CLEARWATER, FL City-St-Zip: TAMPA, FL 33615

Title: () Delete Title: (X) Change ( ) Addition CALHOUN, RYAN CALHOUN, RYAN C Name: Name:

1935 US 19N, #8A 1935 US 19N, #G22 Address: Address: City-St-Zip: CLEARWATER, FL 33759 City-St-Zip: CLEARWATER, FL 33759

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: MARLA D. GRANT **PRES** 03/28/2002