2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 13, 2001 8:00 am
Secretary of State
02-13-2001 90068 048 ****61.25

C0020602

DOCUMENT # N96000006459

1. Entity Name

MY KIDS, SCHOOL KIDS, INC.

Principal Place of Business	Mailing Address
9072 WOODBREEZE BLVD WINDERMERE FL 34786 US	P O BOX 1723 WINDERMERE FL 34786 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
210 Killington Ct	Same as above
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Orlando Fl	City & State
Zip: 32835 Country: USA	Zip Country

4. FEI Number 31-1510946 ☐ 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
MAGILL, PATRICK M ESQ. 2110 EAST ROBINSON STREET ORLANDO FL 32803	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	D BURTON, RUTH 9072 WOODBREEZE BLVD. WINDERMERE FL 34786	☐ Delete	PT Ruth Burton 210 Killington Ct Orl Fl ~~32835~~ 32835	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MARTIN, SCOTT 200 E. ROBINSON ST. SUITE 100 ORLANDO FL 32801	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LEBRACHT, NANCY 5019 LADY BUG PL ORLANDO FL 32821	☒ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Jack Dickerson 5536 Sail Ct Orl Fl 32819	☐ Delete	Treasurer Jack Dickerson 5536 Sail Ct Orl Fl 32819	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	D Anita Dickerson 5536 Sail Ct Orl Fl 32819	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	D Debbie Flynn PO Box 1436 Windermere Fl 34786	☐ Change ☒ Addition

CR2E037 (10/00)

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: Ruth Burton PT 1-31-01 407 3542223
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #