N97000005902

(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL
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Holland & Knight LLP Requester's Name					
vednester 2 usine					
315 So. Calhoun Street Address					
425-5675 City/State/Zip Phone #					
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	:				
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CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):					
1. Kids Home Cone	Inc. N97-5902				
(Corporation Name)	(Document#)				
2.					
(Corporation Name)	(Document #)				
3	'				
3. (Corporation Name)	(Document #)				
4. (Corporation Name)	(Document #)				
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NEW FILINGS	AMENDMENTS				
☐ Profit	Amendment				
Not for Profit	Resignation of R.A., Officer/Director				
Limited Liability Domestication	Change of Registered Agent Dissolution/Withdrawal				
Other	Merger				
OTHER FILINGS	REGISTRATION/QUALIFICATION				
Annual Report	☐ Foreign				
☐ Fictitious Name	Limited Partnership				
	Reinstatement				
	☐ Trademark				
	Examiner's Initials				

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the	e provisions of sections 607.0502,	617.0502, 607.1508, or 617.1508,	Florida Statutes,
this statement of	of change is submitted for a corpora	ation organized under the laws of the	State of
FLORIDA	in order to change its regis	stered office or registered agent, or i	both, in the State
of Florida.	_	- -	
1. The name of	the corporation: KIDS HOME C	ARE, INC.	
		Street S. St. Petersbu	irg, FL 33701
3 The mailing:	address (if different):		TAKE
o. 1110a	addition (in dazoroni).		AF 02
4. Date of incom	rporation/qualification: 10/20/19	97 Document number: N9	7000 00 5902
		tered agent and registered office on f	ile with the
Florida Depa	artment of State:		PART OF
	R. Donald Mastry, Es		~ .
	Holland & Knight LLP One Progress Plaza #		
			•
	St. Petersburg, FL 3	3701 -	-
6. The name and changed):	nd street address of the new regist	tered agent (if changed) and /or reg	istered office (if
arm.Poul.	GARY A. CARNES		
	801 - Sixth Street Se	outh	
		nalibox NOT acceptable)	
	St. Petersburg, FL 3	3701	
		street address of the business office	
Such change wanthorized by the	as authorized by resolution duly ad he board, or the corporation has be	lopted by its board of directors or by en notified in writing of the change.	an officer so
, ,	r, chairman or vice chairman of the board)	J. DENNIS SEXTON, PRE (Printed or typed name and title)	
I hereby laccept I further agree performance of registered ager office address	t the appointment as registered age to comply with the provisions of all f my duties, and I am familiar with ut. Or, if this document is being file I hereby copporat	ent and agree to act in this capacity. Il statutes relative to the proper and and accept the obligation of my pos ed merely to reflect a change in the ion has been notified in writing of th	complete sition as registered his change.
	A (E	OLT 31, 2002	
	Senature of Registered Agent) KNES	Para 4/c-	
If signing on beha	RY A. (ARNES	Mesident/CFO	
(Typed or Printed Name)	(Capacity)	

* * * FILING FEE: \$35.00 * * *