

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006309

FILED
Mar 08, 2004
Secretary of State**Entity Name:** KIDNEY KIDS OF CENTRAL FLORIDA, INC.**Current Principal Place of Business:**5342 FALLING WATER DR
ORLANDO, FL 32818**New Principal Place of Business:**2068 PICNIC LANE
APOPKA, FL 327038**Current Mailing Address:**PO BOX 450984
KISSIMMEE, FL 347450984 US**New Mailing Address:****FEI Number:** 59-3479851**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**DOYLE BOEHM, DELIA
5 SPRINGWOOD TRAIL
ORMOND BEACH, FL 32174 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** PD () Delete
Name: RATHMANN, MICHELE
Address: 5342 FALLING WATER DR
City-St-Zip: ORLANDO, FL 32818**Title:** SD () Delete
Name: WOOLERY, FAYE
Address: 329 BLUE BAYOU DR.
City-St-Zip: KISSIMMEE, FL 34743**Title:** TD () Delete
Name: WOOLERY, PAUL
Address: 329 BLUE BAYOU DR.
City-St-Zip: KISSIMMEE, FL 34743**Title:** VD () Delete
Name: VARGAS, JEANETTE R
Address: 12073 FOUNTAINBROOK BLVD., #1402
City-St-Zip: ORLANDO, FL 32852**Title:** RA () Delete
Name: BOHEN, DELIA D
Address: 5 SPRINGWOOD TRAIL
City-St-Zip: ORMOND BEACH, FL 32174**Title:** VD () Delete
Name: HARTMAN, LINDA
Address: 868 GREGORY LANE
City-St-Zip: ALTAMONTE SPRINGS, FL 32701**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** PD (X) Change () Addition
Name: RATHMANN, MICHELE
Address: 2068 PICNIC LANE
City-St-Zip: APOPKA, FL 32703**Title:** SD (X) Change () Addition
Name: WOOLERY, FAYE
Address: 3122 RIACHUELO LANE
City-St-Zip: KISSIMMEE, FL 34744**Title:** TD (X) Change () Addition
Name: WOOLERY, PAUL
Address: 3122 RIACHUELO LANE
City-St-Zip: KISSIMMEE, FL 34744**Title:** VD (X) Change () Addition
Name: VARGAS, JEANETTE R
Address: 13161 HEMING WAY
City-St-Zip: ORLANDO, FL 32825**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:

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: LESA NICKERSON

CL

03/08/2004

Electronic Signature of Signing Officer or Director

Date

LISA PREVRATIL, FAMILY EVENT COORDINATOR
4147 SKYWAY DRIVE
COCOA, FL 32927

LINDA HARP, ASSIST. MEMBERSHIP DIR.
3803 ARROWSMITH DRIVE
COCOA, FL 32926

BRITT MORAN, MEMBERSHIP DIRECTOR
2590 SWEETWATER TRAIL
MAITLAND, FL 32751

LINDA FULLERTON, ASSIST. FUNDRAISING DIR
24936 LESTER WAY
EUSTIS, FL 32736

PATRICK BRINSON, FUNDRAISING DIRECTOR
1627 WEST 24TH STREET
ORLANDO, FL 32805

LESA NICKERSON, COMMUNITY LIAISON
323 LITTLE ASPEN COURT
OCOE, FL 34761