2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2003
Secretary of State

DOCUMENT# P00000104059

Entity Name: GENERATIONS ADULT AND CHILD DAY CARE, INC.

Current Principal Place of Business:

746 NE 3RD AVE
FORT LAUDERDALE, FL 33304

New Principal Place of Business:

Current Mailing Address:

746 NE 3RD AVE
FORT LAUDERDALE, FL 33304

New Mailing Address:

FEI Number: 65-1094245 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LAVENDER, JOEL R ESQ
507 SE 11TH COURT
FORT LAUDERDALE, FL 33316

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: TREA ( ) Delete
Name: SMITH, JEAN
Address: 672 MIDDLE RIVER DR.
City-St-Zip: FT. LAUDERDALE, FL 33304 US

Title: PRES ( ) Delete
Name: HINSON-SMITH, RENEE
Address: 6310 NE 19TH AVE
City-St-Zip: FT. LAUDERDALE, FL 33308 US

Title: SECR ( ) Delete
Name: HINSON-SMITH, RENEE
Address: 6310 NE 19TH AVE
City-St-Zip: FT. LAUDERDALE, FL 33308 US

Title: VP ( ) Delete
Name: SMITH, MICHAEL
Address: 672 MIDDLE RIVER DR
City-St-Zip: FT. LAUDERDALE, FL 33304 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RENEE HINSON-SMITH PRES 04/30/2003

Electronic Signature of Signing Officer or Director — Date