

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000084324

FILED
Feb 17, 2003
Secretary of State

Entity Name: RIGHT KIND OF CARE, INC.

Current Principal Place of Business:

8217 WEST ATLANTIC BLVD
CORAL SPRINGS, FL 33071

New Principal Place of Business:

Current Mailing Address:

3157 NW 72 AV
MARGATE, FL 33063

New Mailing Address:

8217 WEST ATLANTIC BLVD
CORAL SPRINGS, FL 33071

FEI Number: 65-1136004

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCKINNEY, CHRISTINA
3157 NW 72 AV
MARGATE, FL 33063

Name and Address of New Registered Agent:

MCKINNEY, CHRISTINA
8217 WEST ATLANTIC BLVD
CORAL SPRINGS, FL 33071

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: CHRISTINA MCKINNEY

02/17/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: MCKINNEY, CHRISTINA
Address: 3157 NW 72 AV
City-St-Zip: MARGATE, FL 33063

Title: CEO () Delete
Name: MCKINNEY, STEVEN
Address: 3157 NW 72 AV
City-St-Zip: MARGATE, FL 33063

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: MCKINNEY, CHRISTINA
Address: 8217 WEST ATLANTIC BLVD
City-St-Zip: CORAL SPRINGS, FL 33071

Title: CEO (X) Change () Addition
Name: MCKINNEY, STEVEN
Address: 8217 WEST ATLANTIC BLVD
City-St-Zip: CORAL SPRINGS, FL 33071

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: CHRISTINA MCKINNEY

PRES

02/17/2003

Electronic Signature of Signing Officer or Director

Date