

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 21, 2003 8:00 am
Secretary of State

04-21-2003 90446 043 ***150.00

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1. Entity Name

KIDS LOVE US OF CASSELBERRY, INC.



Principal Place of Business

300 EAGLE CIR
CASSELBERRY FL 32707

Mailing Address

300 EAGLE CIR
CASSELBERRY FL 32707

2. Principal Place of Business

3. Mailing Address

4381 Steed Terrace

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Winter Park, FL

City & State

City & State

Zip

Country

Zip

32792

Country

USA

4. FEI Number

02-0625451

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

MCNAIR, CRAIG D

1250 S US HWY 17-92 STE 250

LONGWOOD FL 32750

7. Name and Address of New Registered Agent

Name

Petrie, Coleman A

Street Address (P.O. Box Number is Not Acceptable)

4381 Steed Terrace

City

Winter Park

FL

Zip Code

32792

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Coleman Alan Petrie, Jr.

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/17/03

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D ☒ Delete
NAME MCNAIR, CRAIG D
STREET ADDRESS 1250 S US HWY 17-92 STE 250
CITY-ST-ZIP LONGWOOD FL 32750

TITLE D ☐ Delete
NAME PETRIE, ALAN
STREET ADDRESS 1250 S US HWY 17-92 STE 250
CITY-ST-ZIP LONGWOOD FL 32750

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P/D ☒ Change ☐ Addition
NAME Petrie, Elizabeth A.
STREET ADDRESS 4381 Steed Terrace
CITY-ST-ZIP Winter Park, FL 32792

TITLE S/D ☒ Change ☐ Addition
NAME Petrie, Coleman A.
STREET ADDRESS 4381 Steed Terrace
CITY-ST-ZIP Winter Park, FL 32792

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 607, 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:

Coleman Alan Petrie, Jr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/17/03

Date

407-681-1900

Daytime Phone #

CR2E034 (10/02)