

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P40179

FILED  
Aug 02, 2002  
Secretary of State

Entity Name: THE KIND FOUNDATION, INC.

## Current Principal Place of Business:

11911 US HIGHWAY 1  
#201  
N PALM BEACH, FL 33408 US

## New Principal Place of Business:

## Current Mailing Address:

C/O B. SHERIDAN  
8527 EGRET MEADOW LANE  
WEST PALM BEACH, FL 33412

## New Mailing Address:

FEI Number: 33-0236813

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SHERIDAN, BARBARA  
8527 EGRET MEADOW LANE  
WEST PALM BEACH, FL 33412 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: SHERIDAN, PAUL R  
Address: 8527 EGRET MEADOW LANE  
City-St-Zip: WEST PALM BEACH, FL 33412

Title: VPD ( ) Delete  
Name: SCHROEDER, NADINE  
Address: 1923 PORTAGE LANDING SOUTH  
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: D ( ) Delete  
Name: MCAVEENEY, MAUREEN  
Address: 3575 RT 106  
City-St-Zip: READING, VT 05062

Title: SD ( ) Delete  
Name: VANDERSTRAETEN, CAROL  
Address: 11911 US HWY ONE TE-207  
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: TD ( ) Delete  
Name: JACUPKE, JOHN  
Address: 206 EAGLETON LAKES BLVD  
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: D ( ) Delete  
Name: SOVIE, DONALD  
Address: 28022 CAMINOL LA RONDA  
City-St-Zip: SAN JUAN CAPISTRANO, CA 92675

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VPD (X) Change ( ) Addition  
Name: SCHROEDER, NADINE  
Address: 1923 PORTAGE LANDING SOUTH  
City-St-Zip: NORTH PALM BEACH, FL 33408

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

SIGNATURE: PAUL R. SHERIDAN

MR.

08/02/2002

Electronic Signature of Signing Officer or Director

Date

CINDY C. MANDES, DIRECTOR  
8241 HERITAGE CLUB DRIVE  
WEST PALM BEACH, FL 33412

CINDY C. MANDES  
8241 HERITAGE CLUB DRIVE  
WEST PALM BEACH, FL 33412