2002 UNIFORM BUSINESS REPORT (UBR) FILED Apr 24, 2002 8:00 am Secretary of State DOCUMENT# P93000014527 1. Entity Name KIDSTOP AT BOYNTON BEACH, INC. 04-24-2002 90484 001 ***450.00 Principal Place of Business Mailing Address 1490 GATEWAY BLVD. 200 TALCOTT AVENUE SOUTH **BOYNTON BEACH FL 33426** WATERTOWN MA 02472 US 2. Principal Place of Business 3. Mailing Address .: Suite, Apt. #, etc.-Suite, Apt-#, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0394003 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301 Zip Code FL 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. SIGNATURE Signature, typed or printed name of registered agent and title DATE 9. This corporation is eligible to satisfy its Intangible FILE NOWIII FEE IS \$150.00 10. Election Campaign Financing Tax filing requirement and elects to do so. \$5.00 May Be After May 1, 2002 Fee will be \$550,00 Make Check Payable to Department of State Trust Fund Contribution. Added to Fees (See criteria on back) 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. PC00 TITLE ☐ Delete coo & Director Change NAME TOCIO, MARY A NAME STREET ADDRESS 200 TALCOTT AVE SOUTH STREET ADDRESS CITY-ST-ZIP WATERTOWN MA 02472 CITY-ST-ZIP TITLE CEOD **Delete** TITLE CEO a Director ☐ Change **X** Addition Brown, Roger H NAME David H. Lissy STREET ADDRESS 200 TALCOTT AVE SOUTH STREET ADDRESS CITY-ST-ZIP WATERTOWN MA 02472 CITY-ST-ZIP TITLE **CFOT** ☐ Delete TITLE Change Addition NAME BOLAND, ELIZABETH J NAME STREET ADDRESS 200 TALCOTT AVE SOUTH STREET ADDRESS CITY-ST-7IP WATERTOWN MA 02472 CITY-ST-ZIP TITLE **VPSD** ☐ Delete ☐ Change ☐ Addition NAME Dreier, Stephen I NAME STREET ADDRESS 200 TALCOTT AVE SOUTH STREET ADDRESS CITY-ST-ZIP WATERTOWN MA 02472 CITY-ST-7IF TITLE Delete ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME STREET ADDRESS

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR



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CHECK REQUEST FORM

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Date: 4-902	Vendor Name: Address: City/State:	Department of State - Florida Dirision of Corporations Uniform Brings Report Filings V.O. Box 1500	
	Zip:		
•			L 32302-1500
		(Required if 1st time vendor.)	
Description	Account No.	Cost Cent	Amount
2002 AR Giling			
(ees (CFS)	218500	∞03	\$ 150.00
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	-		
	Total Amount Due		\$ 150.00
SPECIAL INSTRUCTIONS	Please	Date check needed by recipient:	4902 MM DAY YR
Mail to Center Mail to Vendor with Attachment Mail to Vendor with Attachment		Requested by: ESL	MM DAY YR
		* Approval required if dollar amount is more than \$200.00	
		* Approved by:	·
UPS to Center			
UPS to Vendor			
	WHITE COPY to A/P	YELLOW COPY for your files	