

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000001316

Entity Name: A+...KID'S HEALTHY LUNCH CORP.

Current Principal Place of Business:

1720 MEMORY LANE
JACKSONVILLE, FL 32210

Current Mailing Address:

1720 MEMORY LANE
JACKSONVILLE, FL 32210

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WILLIAMS, HENRY L
10644 SQUIRES CT
JACKSONVILLE, FL 32084 US

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

Officer/Director Detail :

Title PD
Name MINIEL, MELINDA
Address 1720 MEMORY LANE
City-State-Zip: JACKSONVILLE FL 32210

Title STD
Name WILLIAMS, HENRY L
Address 10644 SQUIRES CT.
City-State-Zip: JACKSONVILLE FL 32257

Title VD
Name WILLIAMS, MARK A
Address 286 STATE ROAD 16
City-State-Zip: ST. AUGUSTINE FL 32084

I hereby 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 all other like empowered.

SIGNATURE: MELINDA MINIEL

PRESIDENT

04/28/2017

Electronic Signature of Signing Officer/Director Detail

Date