

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50407

Entity Name: KIDS BEATING CANCER, INC.

Current Principal Place of Business:

228 E WINTER PARK STREET
ORLANDO, FL 32804

Current Mailing Address:

228 E WINTER PARK STREET
ORLANDO, FL 32804 US

FEI Number: 59-3136203

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

VOIGHT-GUEDES, MARGARET
228 E WINTER PARK STREET
ORLANDO, FL 32804 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 DIRECTOR, VP
Name GUEDES, BEN MD
Address PO BOX 2306
City-State-Zip: WINTER PARK FL 32790

Title DIRECTOR, CEO, PRESIDENT
Name GUEDES, MARGARET
Address 1010 VIA MERANO CT
City-State-Zip: WINTER PARK FL 32789

Title DIRECTOR
Name STOUT, MARILYN
Address 1400 S. ORLANDO AVE., #103
City-State-Zip: WINTER PARK FL 32789

Title DIRECTOR, SECRETARY
Name WOO, KAYLENE
Address 604 MINNEHAHA LANE
City-State-Zip: MAITLAND FL 32751

Title DIRECTOR, BOARD ATTORNEY
Name BOCCHINO, JOHN ESQ.
Address 228 E WINTER PARK STREET
City-State-Zip: ORLANDO FL 32804

Title DIRECTOR, MEDICAL DIRECTOR
Name SHOOK, DAVID DR.
Address 228 E WINTER PARK STREET
City-State-Zip: ORLANDO FL 32804

Title DIRECTOR, COO, CHAIRMAN
Name AZAR, SAM
Address 228 E WINTER PARK STREET
City-State-Zip: ORLANDO FL 32804

Title DIRECTOR
Name SAXON, DONNIE
Address 228 E WITER PARK ST
City-State-Zip: ORLANDO FL 32804

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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: MARGARET VOIGHT GUEDES

PRESIDENT CEO

04/15/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name LUPO, TOM
Address 228 E WINTER PARK ST
City-State-Zip: ORLANDO FL 32804

Title DIRECTOR, TREASURER
Name MILLER, SETH
Address 228 E WINTER PARK ST
City-State-Zip: ORLANDO FL 32804

Title DIRECTOR
Name MCFADDEN, KIM
Address 228 E WINTER PARK ST
City-State-Zip: ORLANDO FL 32804