

2021 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F12000002681

Entity Name: KID POWER CARES, INC.

Current Principal Place of Business:

2317 CARDINAL DRIVE
WICHITA, KS 67204

Current Mailing Address:

2317 CARDINAL DRIVE
WICHITA, KS 67204

FEI Number: 45-2673368

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MEAD, GERALD
2443 SUNDANCER DRIVE
CLEARWATER, FL 33759 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 P
Name WILSON, BRUCE H
Address 7706 WEST CORNELISON STREET
City-State-Zip: WICHITA KS 67212

Title ST
Name WILSON, NATALIE S
Address 2317 CARDINAL DRIVE
City-State-Zip: WICHITA KS 67204

Title DIRECTOR
Name HOY, MARK
Address WEST ELEMENTARY
501 NORTH SHERIDAN AVE
City-State-Zip: VALLEY CENTER KS 67147

Title DIRECTOR
Name GLEESON, VALLERIE
Address NEWTON MEDICAL CENTER
600 MEDICAL CENTER DRIVE
City-State-Zip: NEWTON KS 67114

Title DIRECTOR
Name STENZEL, KARLA
Address 8311 EAST ROSE LANE
City-State-Zip: WICHITA KS 67207

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: NATALIE WILSON

SEC-TREAS

01/11/2021

Electronic Signature of Signing Officer/Director Detail

Date