2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000003041

Entity Name: KINDERVISION, INCORPORATED

Current Principal Place of Business:

19 E THIRD STREET SUITE 204

PERU. IN 46970

Current Mailing Address:

5915 N. OCEANSHORE BLVD SUITE A PALM COAST. FL 32127 US

FEI Number: 35-1941922 Certificate of Status Desired: No.

Name and Address of Current Registered Agent:

SEBASTIAN, DOUGLAS 27 SANDPIPER LANE PALM COAST, FL 32137 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: DOUGLAS SEBASTIAN 03/10/2018

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

VC Title Title **DIRECTOR**

Name KEHLBECK, BILL Name MINGELDORFF, LARRY

19 E THIRD STREET SUITE 204 Address Address 19 E THIRD STREET SUITE 204

City-State-Zip: **PERU IN 46970** PERU IN 46970 City-State-Zip:

Title PRESIDENT, CEO Title

Name SEBASTIAN, DOUGLAS Name MCDONOUGH, CHRIS

Address 19 E THIRD STREET SUITE 204 Address 19 E THIRD STREET SUITE 204

PERU IN 46970 City-State-Zip: City-State-Zip: PERU IN 46970

Title VΡ Title **DIRECTOR**

Name SEBASTIAN, NANCY Name SPETH, TAMI

Address 19 E THIRD STREET SUITE 204 Address 19 E THIRD STREET SUITE 204

City-State-Zip: PERU IN 46970 City-State-Zip: PERU IN 46970

Title DIRECTOR DIRECTOR Title

Name MILLER, DARRELL Name HOLWEGER, AL

Address 19 E THIRD STREET SUITE 204 Address 19 E THIRD STREET SUITE 204

City-State-Zip: PERU IN 46970 City-State-Zip: PERU IN 46970

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

SIGNATURE: DOUGLAS D SEBASTIAN

PRESIDENT

03/10/2018

FILED Mar 10, 2018

Secretary of State

CC6203075365

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR

Name REAGAN, MICHAEL

Address 19 E THIRD STREET SUITE 204

City-State-Zip: PERU IN 46970