Electronic Signature of Signing Officer/Director Detail

2020 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

Name and Address of Current Registered Agent:

SEBASTIAN, DOUGLAS 5915 N. OCEANSHORE BLVD SUITE A 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			01/13/2020
	Electronic Signature of Registered Agent			Date
Officer/Dire	ctor Detail :			
Title	VC	Title	DIRECTOR	
Name	KEHLBECK, BILL	Name	MINGELDORFF, LARRY	
Address	19 E THIRD STREET SUITE 204	Address	19 E THIRD STREET SUITE 20	4
City-State-Zip:	PERU IN 46970	City-State-Zip:	PERU IN 46970	
Title	D	Title	PRESIDENT, CEO	
Name	MCDONOUGH, CHRIS	Name	SEBASTIAN, DOUGLAS	
Address	19 E THIRD STREET SUITE 204	Address	19 E THIRD STREET SUITE 20	4
City-State-Zip:	PERU IN 46970	City-State-Zip:	PERU IN 46970	
Title	DIRECTOR	Title	VP	
Name	SPETH, TAMI	Name	SEBASTIAN, NANCY	
Address	19 E THIRD STREET SUITE 204	Address	19 E THIRD STREET SUITE 20	4
City-State-Zip:	PERU IN 46970	City-State-Zip:	PERU IN 46970	
Title	DIRECTOR	Title	DIRECTOR	
Name	HOLWEGER, AL	Name	MILLER, DARRELL	
Address	19 E THIRD STREET SUITE 204	Address	19 E THIRD STREET SUITE 20	4
City-State-Zip:	PERU IN 46970	City-State-Zip:	PERU IN 46970	

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PRESIDENT

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

FILED Jan 13, 2020 Secretary of State 3748761755CC

Certificate of Status Desired: Yes

01/13/2020

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	REAGAN, MICHAEL
Address	19 E THIRD STREET SUITE 204
City-State-Zip:	PERU IN 46970