

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 722141

FILED
Mar 10, 2010
Secretary of State

Entity Name: AMIKIDS TAMPA, INC.

Current Principal Place of Business:

1730 MARITIME BLVD.
TAMPA, FL 33605

New Principal Place of Business:

Current Mailing Address:

ASSOCIATED MARINE INSTITUTES
5915 BENJAMIN CENTER DRIVE
TAMPA, FL 33634

New Mailing Address:

FEI Number: 23-7155996 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HULL, DAVID J
SMITH, HULSEY & BUSEY
225 WATER STREET, STE. 1800
JACKSONVILLE, FL 32202 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: C
Name: CRISER, MARK
Address: 101 E. KENNEDY BLVD. , SUITE 3700
City-St-Zip: TAMPA, FL 33602

Title: P
Name: NELSON, SETH
Address: 3111 W. DR. MLK BLVD. , SUITE 100
City-St-Zip: TAMPA, FL 33607

Title: VP
Name: METHENY, MARK
Address: 600 N. WESTSHORE BLVD., SUITE 600
City-St-Zip: TAMPA, FL 33609

Title: S
Name: GARCIA, CANDACE
Address: 101 E. KENNEDY BLVD., SUITE 3700
City-St-Zip: TAMPA, FL 33602

Title: T
Name: AYALA, DEHART
Address: 1924 W. MLK BLVD.
City-St-Zip: TAMPA, FL 33607

Title: D
Name: STANDER, O.B.
Address: 5915 BENJAMIN CENTER DRIVE
City-St-Zip: TAMPA, FL 33634

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: O.B. STANDER

D

03/10/2010

Electronic Signature of Signing Officer or Director

Date