

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 741389

FILED  
Mar 06, 2012  
Secretary of State

**Entity Name:** WIRA CHRISTMAS KIDS, INC.

**Current Principal Place of Business:**

4100 METZGAR RD.  
FORT PIERCE, FL 34947 US

**New Principal Place of Business:**

**Current Mailing Address:**

14105 ANGLE ROAD  
FORT PIERCE, FL 34945 US

**New Mailing Address:**

FEI Number: 59-1829834      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

DUNN, CLEO  
14105 ANGLE ROAD  
FORT PIERCE, FL 34945 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: PD  
Name: WYATT, CAROL  
Address: 444 SOUTHWEST JACKSON PLACE  
City-St-Zip: PORT SAINT LUCIE, FL 34986

Title: TD  
Name: DUNN, CLEOPATRA  
Address: 14105 ANGLE ROAD  
City-St-Zip: FORT PIERCE, FL 34945

Title: VD  
Name: BURCHFIELD, ED  
Address: 924 C SAVANNA'S POINT DRIVE  
City-St-Zip: FORT PIERCE, FL 34982

Title: SD  
Name: WILSON, JANE  
Address: 2003 ESPLANDE AVENUE  
City-St-Zip: FORT PIERCE, FL 34982

Title: D  
Name: WYATT, GREG  
Address: 444 SOUTHWEST JACKSON PLACE  
City-St-Zip: PORT SAINT LUCIE, FL 34986

Title: D  
Name: DUNN, EARNEST  
Address: 14105 ANGLE ROAD  
City-St-Zip: FORT PIERCE, FL 34945

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: CLEOPATRA B. DUNN

TD

03/06/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date