

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007625

FILED
Feb 19, 2005
Secretary of State

Entity Name: CREATIVE KIDS COUNT, INC.

Current Principal Place of Business:

4421 W. CULBREATH AVE.
TAMPA, FL 33609

New Principal Place of Business:

Current Mailing Address:

4421 W. CULBREATH AVE.
TAMPA, FL 33609

New Mailing Address:

FEI Number: 59-3683033

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CFRA, LLC
CORPORATE CENTER THREE AT INT'L PLAZA
4221 W. BOY SCOUT BLVD, 10TH FLOOR
TAMPA, FL 336075736 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: D () Delete
Name: SASSO, GARY L
Address: CORP CT TH INTL 4221 W BYSCT BLVD 10 FL
City-St-Zip: TAMPA, FL 336075736

Title: D () Delete
Name: LEHMAN, KRISTEN
Address: 211 S. MOODY AVE.
City-St-Zip: TAMPA, FL 33609

Title: D () Delete
Name: RUEDEN, KIMBERLY
Address: BERKELEY PREPARATORY SCHOOL, 4811 KELLY RD
City-St-Zip: TAMPA, FL 33615

Title: P () Delete
Name: SASSO, JENNIFER M
Address: 4421 W CULBREATH AVE
City-St-Zip: TAMPA, FL 33609

Title: ST () Delete
Name: SASSO, KAREN J
Address: 4421 W CULBREATH AVE
City-St-Zip: TAMPA, FL 33609

Title: V () Delete
Name: ALBERTS, KATIE
Address: 17009 CANDELEDA DE AVILA
City-St-Zip: TAMPA, FL 33613

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: GARY L. SASSO

D

02/19/2005

Electronic Signature of Signing Officer or Director

Date