2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 13, 2008
Secretary of State

DOCUMENT# N03000000460

Entity Name: L & K TEEN SUMMIT INC.

Current Principal Place of Business:

1580 BROOK FOREST DRIVE
JACKSONVILLE, FL 32208

New Principal Place of Business:

Current Mailing Address:

1580 BROOK FOREST DRIVE
JACKSONVILLE, FL 32208

New Mailing Address:

FEI Number: 13-4232478 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

JAMES, FELICIA L
3107 SPRING GLEN RD.
STE. 205
JACKSONVILLE, FL 32208 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: CEO ( ) Delete
Name: JAMES, FELICIA L
Address: 1580 BROOK FOREST DRIVE
City-St-Zip: JACKSONVILLE, FL 32208

Title: P ( ) Delete
Name: WATSON, JOYCE
Address: 994 TORTOISE WAY
City-St-Zip: JACKSONVILLE, FL 32218

Title: VP ( ) Delete
Name: NEWSOME, SONYA
Address: 10423 GAILWOOD CIRCLE
City-St-Zip: JACKSONVILLE, FL 32218

Title: D ( ) Delete
Name: JONES-STUTSON, LORNA
Address: 492 WHITING LANE
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: M ( ) Delete
Name: LONG, JIMMIE L
Address: 1706 ART MUSEUM DR., L-9
City-St-Zip: JACKSONVILLE, FL 32207

Title: S ( ) Delete
Name: JAMES, SHERYLL D
Address: 1580 BROOK FOREST DRIVE
City-St-Zip: JACKSONVILLE, FL 32208

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: JAMES, FELICIA L
Address: 1580 BROOK FOREST DRIVE
City-St-Zip: JACKSONVILLE, FL 32208

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

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

Title: T (X) Change ( ) Addition
Name: SALTER, KENNETH A
Address: 1580 BROOK FOREST DRIVE
City-St-Zip: JACKSONVILLE, FL 32208

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 exemption stated in Chapter 119, 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: FELICIA JAMES D 05/13/2008
Electronic Signature of Signing Officer or Director — Date