

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000004953

FILED
Apr 30, 2009
Secretary of State

Entity Name: KIDS' POWER PLAY, INC.

Current Principal Place of Business:

17593 MIDDLEBROOK WAY
BOCA RATON, FL 33496 US

New Principal Place of Business:

Current Mailing Address:

17593 MIDDLEBROOK WAY
BOCA RATON, FL 33496 US

New Mailing Address:

FEI Number: 38-3783529

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DALTON, LIONAL
17593 MIDDLEBROOK WAY
BOCA RATON, FL 33496 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 () Delete
Name: DALTON, LIONAL
Address: 17593 MIDDLEBROOK WAY
City-St-Zip: BOCA RATON, FL 33496 US

Title: SD () Delete
Name: DALTON, KIMBERLY
Address: 17593 MIDDLEBROOK WAY
City-St-Zip: BOCA RATON, FL 33496 US

Title: D () Delete
Name: NEVELS, LAKESHIA
Address: 3479 CLEMENT AVE
City-St-Zip: MAPLE HEIGHTS, OH 44137 US

Title: D () Delete
Name: BOSTON, PATRICK
Address: 16251 LEISURE ST.
City-St-Zip: DETROIT, MI 48235 US

Title: D () Delete
Name: STEPHENS, LOTANYA
Address: 21312 SEMINOLE ST.
City-St-Zip: SOUTHFIELD, MI 48033

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
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: LIONAL DALTON

PRES

04/30/2009

Electronic Signature of Signing Officer or Director

Date