2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36236

FILED Feb 21, 2005 Secretary of State

Entity Name: KIDS IN DISTRESS AUXILIARY, INC.

Current Principal Place of Business: New Principal Place of Business:

819 NE 26TH ST 2ND FLOOR

WILTON MANORS, FL 33305 US

Current Mailing Address: New Mailing Address:

819 NE 26 STREET
2ND FLOOR
819 NE 26 STREET
2ND FLOOR
2ND FLOOR

WILTON MANORS, FL 33334 WILTON MANORS, FL 33305

FEI Number: 65-0175802 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

NOLES, MICHELLE

4299 DIAMOND TERRACE

WESTON, FL 33331 US

GOLDSTEIN, KAREN
2712 OAKMONT COURT
WESTON, FL 33332 US

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: KAREN GOLDSTEIN 02/21/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Name:
 FREYMUTH, INGRIO
 Name:
 PARK, BETH

 Address:
 2714 OAKMONT
 Address:
 2950 SURREY LANE

 City-St-Zip:
 WESTON, FL 33326
 City-St-Zip:
 WESTON, FL 33331

 $\label{eq:total_control_control_control} \mbox{Title:} \qquad \mbox{V} \qquad \mbox{() Delete} \qquad \mbox{Title:} \qquad \mbox{() Change () Addition}$

 Name:
 NOLES, MICHÉLLE
 Name:

 Address:
 4299 DIAMOND TERACE
 Address:

 City-St-Zip:
 WESTON, FL 33331
 City-St-Zip:

 $\label{eq:title: VD () Delete Title: V (X) Change () Addition} \end{minipage}$

 Name:
 SCRUGG, TERRY
 Name:
 SERUGA, TERRY

 Address:
 849 GARNET CIR
 Address:
 849 GARNET CIRCLE

 City-St-Zip:
 WESTON, FL 33326
 City-St-Zip:
 WESTON, FL 33326

Title: V () Delete Title: () Change () Addition

 Name:
 MICHAELIADAS, LYNN
 Name:

 Address:
 2465 PROVINCE CIRCLE
 Address:

 City-St-Zip:
 WESTON, FL 33327
 City-St-Zip:

 Name:
 JAKOBS, ANGELA
 Name:
 GOLDSTEIN, KAREN

 Address:
 16708 SAPPHIRE ISLE
 Address:
 2712 OAKMONT COURT

 City-St-Zip:
 WESTON, FL 33331
 City-St-Zip:
 WESTON, FL 33332

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: ANDREA HODGEN CO-T 02/21/2005

Electronic Signature of Signing Officer or Director

Date