2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N38016

FILED Mar 17, 2009 Secretary of State

Entity Name: PASCO KIDS FIRST, INC.

Current Principal Place of Business: New Principal Place of Business: 7615 LITTLE ROAD NEW PORT RICHEY, FL 34654 **Current Mailing Address: New Mailing Address:** 7615 LITTLE ROAD NEW PORT RICHEY, FL 34654 FEI Number: 59-3010809 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: HAMMOND, KEITH 9436 REGENCY PARK BOULEVARD PORT RICHEY, FL 34668 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete SMITHWICK, ROSANNE LEE, CINDY DR. Name: Name: 5313 SHAW STREET Address: 17652 D JAMESTOWN WAY Address: City-St-Zip: NEW PORT RICHEY, FL 34652 City-St-Zip: LUTZ, FL 33558 Title: () Delete Title: (X) Change () Addition LEE, CINDY DR Name: DAVIS, PHYLLIS Name: Address: 17652 D JAMESTOWN WAY Address: 6212 CORSON AVENUE City-St-Zip: LUTZ, FL 33558 City-St-Zip: NEW PORT RICHEY, FL 34653 Title: () Delete Title: (X) Change () Addition GRABOWSKI, MARIANNE DAVIS, PHYLLIS Name: Name: 6212 CORSON AVENUE Address: Address: 7512 RIDGE ROAD City-St-Zip: NEW PORT RICHEY, FL 34653 City-St-Zip: PORT RICHEY, FL 34668 Title: () Delete Title: () Change () Addition Name: MERRICKS, HOWARD Name: Address: 3152 LITTLE ROAD, SUITE 409 Address: City-St-Zip: NEW PORT RICHEY, FL 34655 City-St-Zip: Title: () Delete Title: (X) Change () Addition GRABOWSKI, MARIANNE SANDY, BARLEY Name: Name: 7512 RIDGE ROAD 2511 SEVEN SPRINGS BOULEVARD Address: Address: NEW PORT RICHEY, FL 34668 City-St-Zip: City-St-Zip: NEW PORT RICHEY, FL 34655 Title: () Delete Title: () Change () Addition JOHNSON, DAVID DR Name: Name: Address: 10841 LITTLE ROAD Address:

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.

City-St-Zip:

SIGNATURE: MARIANNE GRABOWSKI S/T 03/17/2009

NEW PORT RICHEY, FL 34654

City-St-Zip: