2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 19, 2012
Secretary of State

DOCUMENT# N94000000063

Entity Name: AMIKIDS YES, INC.

Current Principal Place of Business:

4337 SAFFOLD ROAD
WIMAUMA, FL 33598

New Principal Place of Business:

Current Mailing Address:

AMIKIDS, INC.
5915 BENJAMIN CENTER DRIVE
TAMPA, FL 33634 US

New Mailing Address:

FEI Number: 59-3217810 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HULL, DAVID J
SMITH, HUSLEY & BUSEY
2225 WATER STREET, STE 1800
JACKSONVILLE, FL 32202 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: C
Name: LUCAS, ROBERT
Address: 2018 S. DOVER ROAD
City-St-Zip: DOVER, FL 33527

Title: P
Name: VARNELL, JOHN
Address: 1831 N. PEBBLE BEACH BLVD.
City-St-Zip: SUN CITY CENTER, FL 33573

Title: ST
Name: KNIGHT, ALBERT
Address: PO BOX 625
City-St-Zip: WIMAUMA, FL 33598

Title: D
Name: BUFFINGTON, MICHAEL
Address: 2512 MILLER WOODS CT.
City-St-Zip: VALRICO, FL 33594

Title: D
Name: CHRISTALDI, RONALD
Address: 101 E. KENNEDY BLVD., SUITE 2800
City-St-Zip: TAMPA, FL 33602

Title: D
Name: STANDER, O.B.
Address: 5915 BENJAMIN CENTER DRIVE
City-St-Zip: TAMPA, FL 33634

I hereby 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 all other like empowered.

SIGNATURE: O.B. STANDER D 01/19/2012

Electronic Signature of Signing Officer or Director — Date