

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
Jan 10, 2006  
Secretary of State

DOCUMENT# N95000001501

Entity Name: TYKES AND TEENS, INC.

**Current Principal Place of Business:**

735 COLORADO AVE  
STE 6  
STUART, FL 34994

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 265  
STUART, FL 34995 US

**New Mailing Address:**

FEI Number: 65-0570899

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RALICKI, JEFFREY S  
735 COLORADO AVE  
SUITE 6  
STUART, FL 34994 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: D ( ) Delete  
Name: SCHNEIDER, GLEN  
Address: 200 SW 9TH STREET  
City-St-Zip: OKEECHOBEE, FL 34974 US

Title: D ( ) Delete  
Name: OSTROFKY, MARY ANNE  
Address: 5211 SE BURNING TREE CIRCLE  
City-St-Zip: STUART, FL 34997 US

Title: P ( ) Delete  
Name: RALICKI, JEANNE  
Address: 729 COLORADO AVE  
City-St-Zip: STUART, FL

Title: D ( ) Delete  
Name: PERUGINI, BUNNIE  
Address: 59 CAYMAN PLACE  
City-St-Zip: PALM BEACH GARDENS,, FL 33418

Title: D ( ) Delete  
Name: GENTRY, LINDA  
Address: 2400 SE SALERNO RD  
City-St-Zip: STUART, FL 34997

Title: T ( ) Delete  
Name: FAICHNEY, MARGARET  
Address: 5815 SE FEDERAL HWY  
City-St-Zip: STUART, FL 34997

**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:

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

I hereby certify that the information supplied with this filing does not qualify for the 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: JEFFREY RALICKI

ED

01/10/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date