

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000001870

Entity Name: GREAT KIDS EXPLORER CLUB, INC.

Current Principal Place of Business:

336 S. HALIFAX DRIVE
ORMOND BEACH, FL 32176

Current Mailing Address:

PO BOX 1781
ORMOND BEACH, FL 32175-2615 US

FEI Number: 59-3705879

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MORELLI, KATHY A
4003 CALUSA LANE
ORMOND BEACH, FL 32174 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: KATHY MORELLI

04/17/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CEO
Name MORELLI, KATHY
Address 4003 CALUSA LANE
City-State-Zip: ORMOND BEACH FL 32174

Title OFFICER
Name OLLINGER, PATRICIA
Address 160 WILLOW RUN
City-State-Zip: ORMOND BEACH FL 32174

Title DIRECTOR
Name YOCHUM, MARY
Address P.O. BOX 2884
City-State-Zip: ORMOND BEACH FL 32175

Title OFFICER
Name OCHIPA, RYAN
Address 4 COBBLESTONE TRAIL
City-State-Zip: ORMOND BEACH FL 32174

Title OFFICER
Name FITZGERALD, PAMELA
Address 3147 CONNEMARA DRIVE
City-State-Zip: ORMOND BEACH FL 32174

Title OFFICER
Name SHETH, LAURIE
Address 8 CARRIAGE CREEK WAY
City-State-Zip: ORMOND BEACH FL 32174

Title OFFICER
Name ROMEO, DEAN
Address 1745 JOHN ANDERSON DRIVE
City-State-Zip: ORMOND BEACH FL 32176

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: KATHY MORELLI

**CHIEF EXECUTIVE
OFFICER**

04/17/2017

Electronic Signature of Signing Officer/Director Detail

Date