

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000008430

**Entity Name:** KIDZ IN MOTION, INC.

**Current Principal Place of Business:**

5424 CONWAY PTE CT  
ORLANDO, FL 32812

**Current Mailing Address:**

5424 CONWAY PTE CT  
ORLANDO, FL 32812

**FEI Number: 77-0610114**

**Certificate of Status Desired: No**

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

MAZZOCCO, CAROL S  
5424 CONWAY PTE CT  
ORLANDO, FL 32812 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            VPD  
Name            SAVAGE, JAMES  
Address        8278 STARR GRASS DRIVE  
City-State-Zip: MADISON WI 53710

Title            SD  
Name            DAVIS, JULI  
Address        927 ARPEIKA DR  
City-State-Zip: LAKELAND FL 33813

Title            TREASURER  
Name            JOHNSTON, WOODY  
Address        5528 SW SHATTUCK RD.  
City-State-Zip: PORTLAND OR 97221

Title            VP  
Name            TAMMY, FRANKS  
Address        14441 AQUILLA ROARD  
City-State-Zip: BURTON OH 44021-9447

Title            BOARD MEMBER  
Name            EVANS, SHARON  
Address        2821 AUGUSTA LANE  
City-State-Zip: ARLINGTON TX 76012

Title            BOARD MEMBER  
Name            DUENAS, NOEMI  
Address        2150 WATERSIDE DR.  
City-State-Zip: CHULA VISTA CA 91913

*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: JAMES SAVAGE**

**VICE PRESIDENT**

**01/22/2020**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date