

**2014 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 PD  
Name MAZZOCCO, CAROL S  
Address 5424 CONWAY POINTE COURT  
City-State-Zip: ORLANDO FL 32812

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 TD  
Name JAMES, MIKE  
Address 1228 CHESSER DRIVE  
City-State-Zip: HUNTSVILLE AL 35803

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

Title DIR  
Name TAMMY, FRANKS  
Address 5528 SW SHATTUCK RD.  
City-State-Zip: PORTLAND OR 97221

*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: CAROL S. MAZZOCCO**

**PRESIDENT AND  
DIRECTOR**

**01/10/2014**

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

\_\_\_\_\_  
Date