2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45920

Entity Name: AMIKIDS FOUNDATION, INC.

Current Principal Place of Business:

5915 BENJAMIN CENTER DRIVE

TAMPA. FL 33634

Current Mailing Address:

5915 BENJAMIN CENTER DRIVE AMIKIDS, INC.

TAMPA, FL 33634 US

FEI Number: 59-3095734 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

HULL, DAVID J 225 WATER STREET, STE. 1800 JACKSONVILLE, FL 32202 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

FILED Apr 11, 2018

Secretary of State

CC6065395747

Officer/Director Detail:

Title D Title D

NameTHOMPSON, DANIEL JNameTHOMAS, NEWTONAddress2150 WRIGHTS MILL CRAddress8183 EL CAJON DRIVECity-State-Zip:ATLANTA GA 30224City-State-Zip:BATON ROUGE LA 70815

Title D Title D

Name STANDER, O.B. Name THORNTON, MICHAEL

Address 5915 BENJAMIN CENTER DRIVE Address 5915 BENJAMIN CENTER DRIVE

City-State-Zip: TAMPA FL 33634 City-State-Zip: TAMPA FL 33634

Title D Title D

Name CRISER, MARK Name INGRAHAM, JOHN

Address 5915 BENJAMIN CENTER DRIVE Address 5915 BENJAMIN CENTER DRIVE

City-State-Zip: TAMPA FL 33634 City-State-Zip: TAMPA FL 33634

Title D Title D

Name MARTIN, BILL Name PETREY, ROD

Address 5915 BENJAMIN CENTER DRIVE Address 5915 BENJAMIN CENTER DRIVE

City-State-Zip: TAMPA FL 33634 City-State-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: MICHAEL THORNTON

DIRECTOR

04/11/2018