

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

DOCUMENT# N95000001501

**Entity Name:** TYKES AND TEENS, INC.

**Current Principal Place of Business:**

3577 SW CORPORATE PARKWAY  
PALM CITY, FL 34990

**Current Mailing Address:**

3577 SW CORPORATE PARKWAY  
PALM CITY, FL 34990

**FEI Number:** 65-0570899

**Certificate of Status Desired:** No

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

SHEARER, JEFFREY S  
3577 SW CORPORATE PARKWAY  
PALM CITY, FL 34990 US

**FILED**  
**Jan 20, 2020**  
**Secretary of State**  
**6872174756CC**

*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:** JEFFREY SHEARER

01/20/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            CEO  
Name            SHEARER, JEFFREY  
Address        3577 SW CORPORATE PARKWAY  
City-State-Zip: PALM CITY FL 34990

Title            DIRECTOR  
Name            GONZALEZ, JOHN  
Address        600 SE OCEAN BLVD.  
City-State-Zip: STUART FL 34994

Title            DIRECTOR  
Name            BARRETT, VALERIE  
Address        845 SE OSCEOLA STREET  
City-State-Zip: STUART FL 34994

Title            PRESIDENT  
Name            PHILLIPS, REBECCA  
Address        PO BOX 9010  
City-State-Zip: STUART FL 34995

Title            SECRETARY  
Name            MCCORMICK, ANNE  
Address        3733 SW THISTLEWOOD LANE  
City-State-Zip: PALM CITY FL 34990

Title            DIRECTOR  
Name            KENWORTHY, KEN  
Address        1090 NE 101 AVENUE  
City-State-Zip: OKEECHOBEE FL 34974

Title            DIRECTOR  
Name            VILLWOCK, MICHELLE  
Address        500 E OCEAN BLVD.  
City-State-Zip: STUART FL 34996

Title            TREASURER  
Name            EDENS, SARAH  
Address        16 KNOWLES RD  
City-State-Zip: STUART FL 34996

**Continues on page 2**

*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:** JEFFREY SHEARER

CEO

01/20/2020

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name MCMANUS, F. SHIELDS  
Address 5910 SE FOREST GLADE TRAIL  
City-State-Zip: HOBE SOUND FL 33455

Title DIRECTOR  
Name FRY, STEPHEN  
Address 154 SE WELLS DRIVE  
City-State-Zip: STUART FL 34996

Title DIRECTOR  
Name BOBKO, NOEL  
Address 2400 SE FEDERAL HWY  
City-State-Zip: STUART FL 34994

Title DIRECTOR  
Name ANDRADE, DUANNE  
Address 11162 SW WYNDHAM WAY  
City-State-Zip: PORT ST. LUCIE FL 34987

Title DIRECTOR  
Name YORK, C. MICHAEL REV.  
Address 2955 W. BROOKFIELD WAY  
City-State-Zip: VERO BEACH FL 32966

Title DIRECTOR  
Name RALICKI, JEANNE  
Address 1099 SE WESTMINSTER PLACE  
City-State-Zip: STUART FL 34997

Title DIRECTOR  
Name KNIPPER, PAT  
Address 1831 ENGLISH OAK DRIVE  
City-State-Zip: VERO BEACH FL 32966

Title DIRECTOR  
Name LIBBY, ELLY  
Address 2820 SE DUNE DRIVE, UNIT 2306  
City-State-Zip: STUART FL 34996