## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#724048** 

FILED Jan 15, 2009 Secretary of State

Entity Name: KIDS, INCORPORATED OF THE BIG BEND

Current Principal Place of Business:	New Principal Place of Business:

1170 CAPITAL CIRCLE NE 2326 CENTERVILLE ROAD TALLAHASSEE, FL 323013519 US TALLAHASSEE, FL 32308 US

Current Mailing Address: New Mailing Address:

1170 CAPITAL CIR NE 2326 CENTERVILLE ROAD TALLAHASSEE, FL 323013519 US TALLAHASSEE, FL 32308 US

FEI Number: 23-7411718 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

DAVIS, PAMELA B.

1170 CAPITAL CIR. NE

TALLAHASSEE, FL 32301 US

DAVIS, PAMELA B.

2326 CENTERVILLE ROAD

TALLAHASSEE, FL 32308 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: MALLISSA THOMAS 01/15/2009

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: BC ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 GUNTER, BART
 Name:

 Address:
 3449 MAHONEY DRIVE
 Address:

 City-St-Zip:
 TALLAHASSEE, FL 32301
 City-St-Zip:

Title: 1VP ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 GRAYSON, JOHN
 Name:

 Address:
 118-B SALEM COURT
 Address:

 City-St-Zip:
 TALLAHASSEE, FL 32301
 City-St-Zip:

Title: SEC ( ) Delete Title: ( ) Change ( ) Addition

Name:FITZGERALD, KIMName:Address:107 SAVANNA FOREST CIRCLEAddress:City-St-Zip:CRAWFORDVILLE, FL 32327City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MALLISSA THOMAS CFO 01/15/2009