


# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 05, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # 753372</b> 1. Entity Name OK KIDS, INC.	
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Principal Place of Business OK KIDS, INC. 10403 NEWPORT CIR TAMPA, FL 33612 US	Mailing Address OK KIDS, INC. 10403 NEWPORT CIR TAMPA, FL 33612 US
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05012008 No Chg-NP CR2E037 (4/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-2129154	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  FLANAGAN, PATRICK K 10403 NEWPORT CIR TAMPA, FL 33612
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**DO NOT WRITE IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**Filing Fee is \$61.25  
Due by May 1, 2008**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

U00000948622  
06/02/08-80062-014 61.25

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FLANAGAN, PATRICK K 10403 NEWPORT CIR TAMPA, FL 33612
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD FLANAGAN, CHARLYNNE E 10403 NEWPORT CIR TAMPA, FL 33612
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCFALL, ROBERT M 10403 NEWPORT CIR TAMPA, FL 33612
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** *Patrick K. Flanagan* **5/1/08** **813 936-2417**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #