

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765220

FILED
Jan 13, 2011
Secretary of State

Entity Name: AMIKIDS PALM BEACH, INC.

Current Principal Place of Business:

13425 ELLISON WILSON RD
JUNO BEACH, FL 33408

New Principal Place of Business:

Current Mailing Address:

5915 BENJAMIN CENTER DRIVE
TAMPA, FL 33634

New Mailing Address:

FEI Number: 59-2237919

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HULL, DAVID J
SMITH, HULSEYS & BUSEY
255 WATER ST, SUITE 1800
JACKSONVILLE, FL 32302 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D
Name: MURPHY, ALAN JR
Address: 210 CLEMATIS STREET
City-St-Zip: WEST PALM BEACH, FL 33401

Title: P
Name: ANTHEIL, MICHAEL
Address: 4556 CONCORDIA LANE
City-St-Zip: BOYNTON BEACH, FL 33436

Title: T
Name: HOLZWORTH, PETER
Address: C/O 13425 ELLISON WILSON ROAD
City-St-Zip: JUNO BEACH, FL 33408

Title: D
Name: MERRIAM, JOCK
Address: 153 OAKWOOD LANE
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: C
Name: SARTORY, RICK L
Address: 555 NORTHLAKE BLVD
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: D
Name: STANDER, O.B.
Address: 5915 BENJAMIN CENTER DRIVE
City-St-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: O.B. STANDER

D

01/13/2011

Electronic Signature of Signing Officer or Director

Date