2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#814124

Entity Name: KID'S KRUSADE, INC.

FILED Jul 14, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1416 82ND AVE. VERO BEACH, FL 32966 **Current Mailing Address: New Mailing Address:** 1416 82ND AVE VERO BEACH, FL 32966 FEI Number: 59-1053699 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: STEVENS, ROBERT W 1416 82ND AVE VERO BEACH, FL 32966 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete NOLTE, DAVID Name: Name: 900 ROYAL PALM PLACE Address: Address: City-St-Zip: VERO BEACH, FL 32960 City-St-Zip: Title: Title: () Delete (X) Change () Addition Name: HOLLAND, BILL Name: HOLLAND, BILL Address: 6255 53RD ST Address: 6255 53RD ST City-St-Zip: VERO BEACH, FL City-St-Zip: VERO BEACH, FL 32960 Title: () Delete Title: () Change () Addition RICHARDT, HUGH Name: Name: Address: 480 10TH AVE. Address: City-St-Zip: VERO BEACH, FL 32960 City-St-Zip: Title: P/D () Delete Title: () Change () Addition Name: STEVENS, RICHARD C Name: Address: 1416 82ND AVE Address: City-St-Zip: VERO BEACH, FL 32966 City-St-Zip: Title: () Delete Title: () Change () Addition REDSTONE, PAUL Name: Name: P.O. BOX 310 N/A Address: Address: City-St-Zip: VERO BEACH, FL City-St-Zip: Title: () Delete Title: (X) Change () Addition BECKLEY, JIM BECKLEY, JIM Name: Name: Address: 825 SANDFLY LN Address: PO BOX 2459 VERO BEACH, FL 32963 VERO BEACH, FL 32961 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RICHARD STEVENS P/D 07/14/2004