## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F02000006406

City-St-Zip:

HARTFORT, CT 06103

FILED Jul 06, 2007 Secretary of State

Entity Nar	me: BOUNDLESS PLAYGROUNDS, INC.			
Current P	rincipal Place of Business:	New Prince	New Principal Place of Business:	
	NBURY AVENUE ELD, CT 06002			
Current Mailing Address:		New Maili	New Mailing Address:	
	NBURY AVENUE ELD, CT 06002			
In accordan	ce with s. 607.193(2)(b), F.S., the corporation did not re	•	e.	
Name and	Address of Current Registered Agent:	Name and	Address of New Registered Agent:	
1203 GOV SUITE 101	S FILINGS INCORPORATED ERNORS SQUARE BLVD SSEE, FL 323012960 US			
	named entity submits this statement for the purper of Florida.	oose of changing i	ts registered office or registered agent, or both,	
SIGNATUR	RE:			
	Electronic Signature of Registered Agent		Date	
OFFICERS AND DIRECTORS:		ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	T () Delete DEMBO, AMY 66 HARTWELL ROAD WEST HARTFORD, CT 06117	Title: Name: Address: City-St-Zip:	T (X) Change ( ) Addition BRIGHAM, NEIL 1175 HAMPTON HALL DRIVE ATLANTA, GA 30319 US	
Title: Name: Address: City-St-Zip:	V () Delete BROWN, BARBARA 48 SENECA ROAD WEST HARTFORD, CT 06117	Title: Name: Address: City-St-Zip:	V (X) Change ( ) Addition BROWN, BARBARA 48 SENECA ROAD WEST HARTFORD, CT 06117 US	
Title: Name: Address: City-St-Zip:	P ( ) Delete HELLMAN, ILENE 115 WOODLAND HILLS DRIVE AVON, CT 06001 39	Title: Name: Address: City-St-Zip:	P (X) Change ( ) Addition HELLMAN, ILENE 115 WOODLAND HILLS DRIVE AVON, CT 06001 US	
Title: Name: Address: City-St-Zip:	D ( ) Delete BARZACH, AMY 45 WINTONBURY AVENUE BLOOMFIELD, CT 06002	Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition BARZACH, AMY 45 WINTONBURY AVENUE BLOOMFIELD, CT 06002 US	
Title: Name: Address:	D () Delete JACQUES, BERNARD 225 ASYLLM STREET	Title: Name: Address:	D (X) Change ( ) Addition SHAW, STEVE 276 ADDISON ROAD	

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.

City-St-Zip:

WINDSOR, CT 06095 US

SIGNATURE: AMY JAFFE BARZACH 07/06/2007 ED