

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000004057

FILED
Apr 13, 2009
Secretary of State

Entity Name: BRAVE KIDS, INC.

Current Principal Place of Business:

151 SAWGRASS CORNERS DR
SUITE 204
PONTE VEDRA BEACH, FL 32082

Current Mailing Address:

151 SAWGRASS CORNERS DR
SUITE 204
PONTE VEDRA BEACH, FL 32082

FEI Number: 94-3388832

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

New Principal Place of Business:

151 SAWGRASS CORNERS DR
SUITE 204J
PONTE VEDRA BEACH, FL 32082

New Mailing Address:

151 SAWGRASS CORNERS DR
SUITE 204J
PONTE VEDRA BEACH, FL 32082

Name and Address of Current Registered Agent:

LEWIS, RICHARD Q III, ESQ
780 N. PONCE DE LEON BLVD
ST AUGUSTINE, FL 320853007 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: P () Delete
Name: FITZGERALD, KRISTEN
Address: 1113 S MARSHWIND WAY
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: V () Delete
Name: HALSTED, SCOTT
Address: 3000 SAND HILL ROAD
City-St-Zip: MENLO PARK, CA 94025

Title: S () Delete
Name: BEEKMAN, PHILLIP E
Address: 6693 E PLEASANT RUN, PARKWAY SOUTH DRIVE
City-St-Zip: INDIANAPOLIS, IN 46219

Title: D () Delete
Name: COSGRAVE, PAUL
Address: 1129 PONTE VEDRA BLVD.
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: D () Delete
Name: JONES, BRUCE
Address: 2267 S. BROOK DR.
City-St-Zip: ORANGE PARK, FL 32003

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change () Addition
Name: HALSTED, SCOTT
Address: 656 THROCKMORTON AVE
City-St-Zip: MILL VALLEY, CA 94941

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-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: KRISTEN FITZGERALD

P

04/13/2009

Electronic Signature of Signing Officer or Director

Date