2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2009
Secretary of State

DOCUMENT# L94333

Entity Name: CHILDREN'S CASTLE OF KISSIMMEE, INC.

Current Principal Place of Business:

1431 N CENTRAL AVE
KISSIMMEE, FL 34741 US

New Principal Place of Business:

Current Mailing Address:

1431 N CENTRAL AVE
KISSIMMEE, FL 34741 US

New Mailing Address:

FEI Number: 59-3025477 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FISHBACK, ETHEL
1503 W GATE DR APT LLL#2
KISSIMMEE, FL 34746 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: CEO ( ) Delete
Name: FISHBACK, ETHEL
Address: 1503 W GATE DR APT LLL#2
City-St-Zip: KISSIMMEE, FL 34746

Title: P ( ) Delete
Name: MARQUIS, CAROL
Address: 1901 GRANADA BLVD
City-St-Zip: KISSIMMEE, FL 32743

Title: D ( ) Delete
Name: APY, BONNIE
Address: 1503 WESTGATE DRIVE #2
City-St-Zip: KISSIMMEE, FL 34746

Title: D ( ) Delete
Name: HAMMAN, SUSAN
Address: 2850 PAMPAS CT
City-St-Zip: KISSIMMEE, FL

Title: D ( ) Delete
Name: HORTON, JUNE
Address: 1750 GRANADA BLVD
City-St-Zip: KISSIMMEE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CAROL MARQUIS PRES 03/14/2009

Electronic Signature of Signing Officer or Director — Date