

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000494

Entity Name: KIDS BRIDGE, INC.

FILED
Feb 28, 2008
Secretary of State

Current Principal Place of Business:

238 SAN MARCO AVE
ST. AUGUSTINE, FL 32084

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 244
ST. AUGUSTINE, FL 32084

New Mailing Address:

238 SAN MARCO AVENUE
ST. AUGUSTINE, FL 32084

FEI Number: 59-3618415

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PACETTI, W S
136 MALAGA STREET
ST AUGUSTINE, FL 32084 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: CP () Delete
Name: CHAPMAN, CHRISTINE
Address: 425 TRADEWINDS LANE
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: T () Delete
Name: SHANNON, PALMER
Address: 365 MARSH POINT CR.
City-St-Zip: ST AUGUSTINE, FL 32080

Title: PE () Delete
Name: FLOYD, THERESA
Address: 111 2ND STREET
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: DELORENZO, SHANTEL
Address: 5184 MEDORAS AVENUE
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: VPRE (X) Change () Addition
Name: STRAUGHAN, LYNN
Address: 445 NORTH OCEAN BLVD
City-St-Zip: ST AUGUSTINE, FL 32082

Title: SECR (X) Change () Addition
Name: PELLICER, MOLLIE
Address: 2 8TH STREET
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: TREA () Change (X) Addition
Name: PACETTI, W S
Address: 136 MALAGA STREET
City-St-Zip: ST AUGUSTINE, FL 32084

Title: EXDI () Change (X) Addition
Name: HUTCHINS, SUSAN
Address: 238 SAN MARCO AVENUE
City-St-Zip: ST AUGUSTINE, FL 32084

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: SUSAN HUTCHINS

EXDI

02/28/2008

Electronic Signature of Signing Officer or Director

Date