2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2007
Secretary of State

DOCUMENT# N00000004077

Entity Name: PACE AREA RECREATION FOR KIDS, INC.

Current Principal Place of Business:

4960 FOREST CREEK DRIVE
PACE, FL 32571

New Principal Place of Business:

Current Mailing Address:

4960 FOREST CREEK DRIVE
PACE, FL 32571

New Mailing Address:

FEI Number: 59-3652364 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

FORTUNE, MARY STEWART
4960 FOREST CREEK DRIVE
PACE, FL 32571 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: FORTUNE, MARY STEWART
Address: 4960 FOREST CREEK DR
City-St-Zip: PACE, FL 32571

Title: VP ( ) Delete
Name: LABOMARD, KELLY
Address: 3629 SWEET BAY DR
City-St-Zip: PACE, FL 32571

Title: S ( ) Delete
Name: SHELL, STEPHEN
Address: 5748 ENGLISH TURN DR
City-St-Zip: PACE, FL 32571

Title: T ( ) Delete
Name: FORTUNE, TERRY L
Address: 4960 FOREST CREEK DR
City-St-Zip: PACE, FL 32571

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change ( ) Addition
Name: LABOMARD, KELLY
Address: 5465 STAFFORD CIRCLE
City-St-Zip: PACE, FL 32571

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: MARY STEWART FORTUNE P 05/01/2007

Electronic Signature of Signing Officer or Director — Date