

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Sep 16, 2008
Secretary of State

DOCUMENT# N01000002052

Entity Name: P.A.T.'S KIDS CLUB, INC.

Current Principal Place of Business:1295 14 AVE N
NAPLES, FL 34102**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 11494
NAPLES, FL 34101**New Mailing Address:**

FEI Number: 59-3712845

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:GARNETT, DEBORAH
430 2ND. AVE. N.
NAPLES, FL 34102 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: PD () Delete
Name: BEANE, JOHN
Address: 1700 CASEY KEY DR.
City-St-Zip: PUNTA GORDA, FL 33950Title: TR () Delete
Name: LIPPERT, JOSH
Address: 516 PORTSIDE DR
City-St-Zip: NAPLES, FL 34103Title: S () Delete
Name: MUSTARI, TANYA
Address: 5811 12TH AVE. SW
City-St-Zip: NAPLES, FL 34116Title: D () Delete
Name: COMPTON, CHER
Address: 525 5TH ST. NW
City-St-Zip: NAPLES, FL 34120Title: D () Delete
Name: FRIEND, GAIL
Address: 5400 14TH AVE. SW
City-St-Zip: NAPLES, FL 34116Title: D () Delete
Name: GARNETT, DEBI
Address: 430 2ND AVE. N.
City-St-Zip: NAPLES, FL 34102**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: D (X) Change () Addition
Name: WOLNEK, ALAN
Address: 1520 S POWERLINE ROAD
City-St-Zip: DEERFIELD BEACH, FL 33442 USTitle: D (X) Change () Addition
Name: SMITH, WARREN
Address: 1520 S POWERLINE ROAD
City-St-Zip: DEERFIELD BEACH, FL 33442 USTitle: D (X) Change () Addition
Name: GAZZANO, JULIAN
Address: 1520 S POWERLINE ROAD
City-St-Zip: DEERFIELD BEACH, FL 33442 USTitle: D (X) Change () Addition
Name: SODIKOFF, Nanci
Address: 1520 S POWERLINE ROAD
City-St-Zip: DEERFIELD BEACH, FL 33442 USTitle: D (X) Change () Addition
Name: LIEBMAN, ROBERT
Address: 1520 S POWERLINE ROAD
City-St-Zip: DEERFIELD BEACH, FL 33442 US

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: ALAN WOLNEK

D

09/16/2008

Electronic Signature of Signing Officer or Director

Date