

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006889

FILED
Apr 30, 2008
Secretary of State

Entity Name: KIDS VOTING CENTRAL FLORIDA, INC.

Current Principal Place of Business:

3956 TOWN CENTER BLVD
196
ORLANDO, FL 32837

New Principal Place of Business:

Current Mailing Address:

3956 TOWN CENTER BLVD
#196
ORLANDO, FL 32837

New Mailing Address:

3956 TOWN CENTER BLVD
196
ORLANDO, FL 32837

FEI Number: 59-3748710

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

IBANEZ, SILVIA S ESQ.
622 VERONA ST
KISSIMMEE, FL 34741 US

Name and Address of New Registered Agent:

IBANEZ, SILVIA S ESQ.
3956 TOWN CENTER BLVD
#196
ORLANDO, FL 32837 US

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:

04/30/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: PHELPS, JANIE
Address: 445 W. AMELIA ST. 7TH FLOOR
City-St-Zip: ORLANDO, FL 32801

Title: PD () Delete
Name: MOYE, JIM CPA
Address: 201 SO. ROSALIND AVE- 4TH FLOOR
City-St-Zip: ORLANDO, FL 32802

Title: SD () Delete
Name: IBANEZ, SILVIA
Address: 622 VERONA ST
City-St-Zip: KISSIMMEE, FL 34741

Title: VP () Delete
Name: MARTINEZ, LOURDES
Address: 11907 NAHANNI CT
City-St-Zip: ORLANDO, FL 32837

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change () Addition
Name: PHELPS, JANIE
Address: 445 W. AMELIA ST. 7TH FLOOR
City-St-Zip: ORLANDO, FL 32801

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

Title: TD (X) Change () Addition
Name: IBANEZ, SILVIA
Address: 14400 OKONIS CT
City-St-Zip: ORLANDO, FL 32837

Title: VPD (X) Change () Addition
Name: MARTINEZ, LOURDES
Address: 11907 NAHANNI CT
City-St-Zip: ORLANDO, FL 32837

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: SILVIA S. IBANEZ

TREA

04/30/2008

Electronic Signature of Signing Officer or Director

Date