2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 26, 2009
Secretary of State

DOCUMENT# N02000001232

Entity Name: 4KIDS OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

2401 W. CYPRESS CREEK ROAD
FT. LAUDERDALE, FL 33309

New Principal Place of Business:

Current Mailing Address:

2401 W. CYPRESS CREEK ROAD
FT. LAUDERDALE, FL 33309

New Mailing Address:

FEI Number: 61-1416525 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DAVIS, MARK T
2401 W. CYPRESS CREEK ROAD
FT. LAUDERDALE, FL 33309 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:	D	( ) Delete
Name:	SADER, ROBERT	
Address:	2401 W CYPRESS CREEK ROAD	
City-St-Zip:	FORT LAUDERDALE, FL 33309	
Title:	D	( ) Delete
Name:	BEHNKEN, B.J.	
Address:	2401 CYPRESS CREEK RD	
City-St-Zip:	FORT LAUDERDALE, FL 33309	
Title:	D	( ) Delete
Name:	WEISSING, MATTHEW	
Address:	2401 CYPRESS CREEK RD	
City-St-Zip:	FORT LAUDERDALE, FL 33309	
Title:	D	( ) Delete
Name:	FEE, DAVID	
Address:	2401 W CYPRESS CREEK ROAD	
City-St-Zip:	FORT LAUDERDALE, FL 33309	
Title:	D	( ) Delete
Name:	LAMBERT, LISE MD	
Address:	2401 W CYPRESS CREEK RD	
City-St-Zip:	FORT LAUDERDALE, FL 33309	
Title:	S	( ) Delete
Name:	LUKASIK, TOM	
Address:	2401 W CYPRESS CREEK ROAD	
City-St-Zip:	FORT LAUDERDALE, FL 33309	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	PD	(X) Change ( ) Addition
Name:	SAUDER, DOUGLAS R	
Address:	2401 W CYPRESS CREEK ROAD	
City-St-Zip:	FORT LAUDERDALE, FL 33309	
Title:	CD	(X) Change ( ) Addition
Name:	PETRANGELI, AL	
Address:	2401 CYPRESS CREEK RD	
City-St-Zip:	FORT LAUDERDALE, FL 33309	
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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DOUGLAS R. SAUDER PD 01/26/2009

Electronic Signature of Signing Officer or Director — Date