2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002132

Entity Name: KIDS INC. OF LAKE COUNTY

FILED May 01, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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 1333 E. 3RD. AVE
 719 SUMMIT STEET

 MOUNT DORA, FL 32757
 EUSTIS, FL 32726

Current Mailing Address: New Mailing Address:

PO BOX 34

MOUNT DORA, FL 32756

FEI Number: 59-3101574 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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: Name and Address of New Registered Agent:

STEVENS, SUZANNE R
1333 E. 3RD. AVE.
MOUNT DORA, FL 32757 US

STEVENS, SUZANNE R
719 SUMMIT ST
EUSTIS, FL 3726 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: 05/01/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO () Delete Title: CEO (X) Change () Addition Name: SUZANNE, STEVENS R Name: SUZANNE, STEVENS R

 Name:
 SUZANNE, STEVENS R
 Name:
 SUZANNE, STEVENS

 Address:
 1333 E. 3RD. AVE
 Address:
 719 SUMMIT ST

 City-St-Zip:
 MT. DORA, FL 32757
 City-St-Zip:
 EUSTIS, FL 32726

Title: D () Delete Title: D (X) Change () Addition Name: JOHNSON, CATHY C Name: JOHNSON, CATHY C

 Address:
 1333 E. 3RD. AVE
 Address:
 719 SUMMIT ST

 City-St-Zip:
 MOUNT DORA, FL 32757
 City-St-Zip:
 EUSTIS, FL 32726

Title: D (X) Delete Title: () Change () Addition

 Name:
 MALONE, JOANNE
 Name:

 Address:
 1333 E 3RD AVE
 Address:

 City-St-Zip:
 MOUNT DORA, FL 32757
 City-St-Zip:

Title: D (X) Delete Title: () Change () Addition

 Name:
 MURPHY, LADONNA
 Name:

 Address:
 1333 E 3RD AVE
 Address:

 City-St-Zip:
 MT DORA, FL 32757
 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: SUZANNE R. STEVENS ED 05/01/2009