2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002212

Entity Name: KIDS CENTRAL, INC.

Current Principal Place of Business:

2117 SW HIGHWAY 484

FILED Mar 23, 2009 Secretary of State

OCALA, FL 34473 **Current Mailing Address: New Mailing Address:** 2117 SW HIGHWAY 484 OCALA, FL 34473 FEI Number: 03-0423152 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GREGORY C.HARRELL; MATEER HARBERT, PA GREGORY C.HARRELL; MATEER HARBERT, PA 7 E SILVER SPRINGS BLVD STE 500 7 E SILVER SPRINGS BLVD STE 204 OCALA, FL 34470 OCALA, FL 34470 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: 03/23/2009 Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

New Principal Place of Business:

() Delete () Change () Addition JORDAN, CHARLES E MD Name: Name: Address: 1108 NW MLK JR AVE Address: City-St-Zip: OCALA, FL 34475 City-St-Zip: Title: Title: () Delete (X) Change () Addition Name: IMES, MARK Name: IMES, MARK Address: 60 SW 17TH STREET Address: 60 SW 17TH STREET City-St-Zip: OCALA, FL 34474 City-St-Zip: OCALA, FL 34474 Title: CEO () Delete Title: () Change () Addition SCHULER, CYNTHIA Name: Name: 2117 SW HIGHWAY 484 Address: Address: City-St-Zip: OCALA, FL 34473 City-St-Zip: Title: Title: () Change () Addition () Delete Name: MCGEE, GENE Name: 3810 NORTH PINE VALLEY LOOP Address: Address: City-St-Zip: LECANTO, FL 34461 City-St-Zip: Title: VP/T () Delete Title: (X) Change () Addition DYER, MITCHELL T DYER, MITCHELL T Name: Name: Address: 2324 SE 14TH ST Address: 2324 SE 14TH ST City-St-Zip: OCALA, FL 34471 City-St-Zip: OCALA, FL 34471 Title: () Delete Title: (X) Change () Addition THORPE, BRAD THORPE, BRAD Name: Name: Address: 3600 W SOVERIGN PATH Address: 3600 W SOVERIGN PATH LECANTO, FL 34461 City-St-Zip: LECANTO, FL 34461 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: JOHN J AITKEN **CFO** 03/23/2009