

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Feb 20, 2009
Secretary of State**

DOCUMENT# N02000007543

Entity Name: BLOOMING PLACE FOR KIDS, INC.

Current Principal Place of Business:

1868 1/2 DREW STREET
CLEARWATER, FL 33765

New Principal Place of Business:

1108 COMMODORE STREET
CLEARWATER, FL 33755

Current Mailing Address:

1868 1/2 DREW STREET
CLEARWATER, FL 33765

New Mailing Address:

1108 COMMODORE STREET
CLEARWATER, FL 33755

FEI Number: 06-1650452 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HORN, MARY JANICE Y
1868 1/2 DREW STREET
CLEARWATER, FL 33765 US

Name and Address of New Registered Agent:

HORN, MARY JANICE Y
1108 COMMODORE STREET
CLEARWATER, FL 33755 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: _____ Date: 02/20/2009
Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HORN, MARY JANICE Y
Address: 1108 COMMODORE ST
City-St-Zip: CLEARWATER, FL 33755

Title: D () Delete
Name: HORN, JAMES C
Address: 1108 COMMODORE ST
City-St-Zip: CLEARWATER, FL 33755

Title: D () Delete
Name: NORTON, JEANNE
Address: 17622 PASTURE RD
City-St-Zip: ODESSA, FL 33556

Title: D () Delete
Name: STULL, LAUREN
Address: 301 ISLAND WAY #B
City-St-Zip: CLEARWATER BEACH, FL 33767

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: MARY JANICE Y. HORN D 02/20/2009
Electronic Signature of Signing Officer or Director Date