2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2009
Secretary of State

DOCUMENT# N02000007708

Entity Name: ITS JUST 4 KIDS, INC.

Current Principal Place of Business:

3628 DUCK AVE
KEY WEST, FL 33040

New Principal Place of Business:

Current Mailing Address:

1105 LEON STREET
KEY WEST, FL 33040

New Mailing Address:

FEI Number: 03-0488385 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CINTRON, ROBERT JR.
317 WHITEHEAD STREET
KEY WEST, FL 33040 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: PD ( ) Delete
Name: CIAVOLINO, PAULA
Address: 3628 DUCK AVE
City-St-Zip: KEY WEST, FL 33040

Title: VP ( ) Delete
Name: HOLTKAMP, CADY H
Address: 520 AVENUE B
City-St-Zip: KEY WEST, FL 33040

Title: D ( ) Delete
Name: DUNLOP, JUDI
Address: 1221 VARELA STREET
City-St-Zip: KEY WEST, FL 33040

Title: D ( ) Delete
Name: ENGLAND, FRANCIS
Address: 2383 MIDDLE TORCH ROAD
City-St-Zip: SUMMERLAND KEY, FL 33042

Title: D ( ) Delete
Name: STEIGER, ALICIA .
Address: 1251 NW 8TH STREET
City-St-Zip: BOCA RATON, FL 33486

Title: T ( ) Delete
Name: WINTERS, CINDY
Address: 1180 NORTH FEDERAL HIGHWAY
City-St-Zip: BOCA RATON, FL 33432

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change ( ) Addition
Name: BRANWEIN, MARIA
Address: 1251 NW 8TH STREET
City-St-Zip: BOCA RATON, FL 33486

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

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

Title: D (X) Change ( ) Addition
Name: WINTERS, CINDY
Address: 1180 NORTH FEDERAL HIGHWAY
City-St-Zip: BOCA RATON, FL 33432

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: PAULA CIAVOLINO PD 04/23/2009

Electronic Signature of Signing Officer or Director — Date