2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003214

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Apr 21, 2006 Secretary of State

Entity Name: GREATER SARASOTA'S GREAT KIDS!, INC.

Current Principal Place of Business: New Principal Place of Business: 2674 MARTIN LUTHER KING JR. WAY 2839 HILLVIEW ST. SARASOTA, FL 34234 SARASOTA, FL 34239 **Current Mailing Address: New Mailing Address:** 2674 MARTIN LUTHER KING JR. WAY 2839 HILLVIEW ST SARASOTA, FL 34234 SARASOTA, FL 34239 FEI Number: 55-0825283 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: FORD, EDWIN L PA 107 S OSPREY AVE, STE 210 SARASOTA, FL 34236 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition MACCABE, THOMAS B Name: Name: 284 SUGARMILL DRIVE Address: Address: City-St-Zip: OSPREY, FL 34229 City-St-Zip: Title: SVD () Delete Title: () Change () Addition Name: WILKINS, LUTHER Name: Address: P.O. BOX 3243 Address: City-St-Zip: SARASOTA, FL 34230 City-St-Zip: Title: () Delete Title: () Change () Addition DRIZOS, NICHOLAS J Name: Name: 1830 S OSPREY AVE, STE 102 Address: Address: City-St-Zip: SARASOTA, FL 34239 City-St-Zip: Title: () Delete Title: () Change () Addition Name: PRINIE, JERRY W Name: Address: 615 LEHIGH RD Address: City-St-Zip: VENICE, FL 34239 City-St-Zip: Title: () Delete Title: (X) Change () Addition ATKINS, ROBERT ATKINS, ROBERT Name: Name: 2674 DR M. L. KING, JR. WAY 2839 HILLVIEW ST Address: Address: City-St-Zip: SARASOTA, FL 34234 City-St-Zip: SARASOTA, FL 34239

I hereby certify that the information supplied with this filing does not qualify for the 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: THOMAS MACCABE PD 04/21/2006