2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2005
Secretary of State

DOCUMENT# N03000009361

Entity Name: SPINKIDS, INC.

Current Principal Place of Business:

259 ECHO CIRCLE
FT. WALTON BEACH, FL 32548 US

New Principal Place of Business:

Current Mailing Address:

259 ECHO CIRCLE
FT. WALTON BEACH, FL 32548 US

New Mailing Address:

FEI Number: 41-2113416 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ELSENER, JOHN E
259 ECHO CIRCLE
FT. WALTON BEACH, FL 32548 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:	PRES	( ) Delete
Name:	ELSENER, MARY A	
Address:	259 ECHO CIRCLE	
City-St-Zip:	FT. WALTON BEACH, FL 32548 US	
Title:	TREA	( ) Delete
Name:	SCHINNER, STEVEN J	
Address:	9892 JANE COURT	
City-St-Zip:	CINCINNATI, OH 45241 US	
Title:	DIR	( ) Delete
Name:	DUGUAY, BRIAN P	
Address:	4761 BROADWAY APT. #5D	
City-St-Zip:	NEW YORK, NY 10034 US	
Title:	DIR	(X) Delete
Name:	SIMS, JULIE M	
Address:	1840 N. MILLSWEET DRIVE	
City-St-Zip:	UPLAND, CA 91784 US	
Title:	DIR	(X) Delete
Name:	CURRY, KATHLEEN A	
Address:	215 ELDRIDGE ROAD	
City-St-Zip:	FT. WALTON BEACH, FL 32547	
Title:	DIR	(X) Delete
Name:	GIUGOVAZ, VERGINIA L	
Address:	1597 SANBORNE DRIVE	
City-St-Zip:	CINCINNATI, OH 45215 US	

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:	
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 for the exemption stated in Section 119.07(3)(i), 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 ANNE ELSENER PRES 04/21/2005
Electronic Signature of Signing Officer or Director — Date