

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005805

FILED
Mar 31, 2010
Secretary of State

Entity Name: THE PUZZLE PLACE FOUNDATION, INC.

Current Principal Place of Business:

6200 SWANS TERRACE
A
COCONUT CREEK, FL 33073

New Principal Place of Business:

6200 SWANS TERRACE
SUITE-A
COCONUT CREEK, FL 33073

Current Mailing Address:

6200 SWANS TERRACE
A
COCONUT CREEK, FL 33073

New Mailing Address:

6200 SWANS TERRACE
SUITE-A
COCONUT CREEK, FL 33073

FEI Number: 30-0263832

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CAMPBELL, KRISTIN
10292 OASIS PALM DRIVE
C
TAMPA, FL 33615 US

Name and Address of New Registered Agent:

HOFMANN, LINDA
469 NE 93RD STREET
MIAMI SHORES, FL, FL 33138 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: LINDA HOFMANN

03/31/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP
Name: BLACKBURN, ELLEN B
Address: 6200 SWANS TERRACE
City-St-Zip: COCONUT CREEK, FL 33073

Title: DV
Name: CAMPBELL, KRISTIN
Address: 10292 OASIS PALM DRIVE
City-St-Zip: TAMPA, FL 33615

Title: DS
Name: KRING, TERRI
Address: 3400 BAYVIEW DRIVE
City-St-Zip: FT. LAUDERDALE, FL 33306

Title: DT
Name: GARDNER, JILL
Address: 6430 NW 41ST TERRACE
City-St-Zip: COCONUT CREEK, FL 33073

I hereby 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 all other like empowered.

SIGNATURE: KRISTIN CAMPBELL

DV

03/31/2010

Electronic Signature of Signing Officer or Director

Date