

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000007085

FILED
Apr 30, 2009
Secretary of State

Entity Name: SUPPORT KIDS NOW, INC.

Current Principal Place of Business:

242 SW 159TH WAY
WESTON, FL 33326

New Principal Place of Business:

12770 KINGSWAY ROAD
WELLINGTON, FL 33414

Current Mailing Address:

P.O. BOX 266454
WESTON, FL 33326

New Mailing Address:

FEI Number: 38-3758109

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SWEENEY, SUSAN
242 SW 159TH WAY
WESTON, FL 33326 US

Name and Address of New Registered Agent:

SWEENEY, SUSAN
12770 KINGSWAY ROAD
WELLINGTON, FL 33414 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: SUSAN SWEENEY

04/30/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SWEENEY, SUSAN
Address: 242 SW 159TH WAY
City-St-Zip: WESTON, FL 33326

Title: D () Delete
Name: SINGER, BOB
Address: 5706 S. TRAVELLERS PALM LANE
City-St-Zip: TAMARAC, FL 33319

Title: D () Delete
Name: SWEENEY, SHAUNA
Address: 321 SIESTA KEY CIR., #6228
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SWEENEY, SUSAN
Address: 12770 KINGSWAY ROAD
City-St-Zip: WELLINGTON, FL 33414

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

Title: D (X) Change () Addition
Name: SWEENEY, SHAUNA
Address: 6560 PAUL MAR DRIVE
City-St-Zip: LANTANA, FL 33462

Title: D () Change (X) Addition
Name: VIGNEAUX, PAUL CPA
Address: 8350 BONITA ISLE DRIVE
City-St-Zip: LAKE WORTH, FL 33467

Title: D () Change (X) Addition
Name: CHELLIMI, CYNTHIA MCSE
Address: 908 SW SULTAN DRIVE
City-St-Zip: PORT SAINT LUCIE, FL 34953

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: SUSAN SWEENEY

P

04/30/2009

Electronic Signature of Signing Officer or Director

Date