2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000010022

FILED Apr 30, 2009 Secretary of State

Entity Name: 4KIDS OF WEST CENTRAL FLORIDA, INC.

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
	HWY 19 NORTH S PARK, FL 33782			
Current Mailing Address:		New Mailing Address:		
	HWY 19 NORTH S PARK, FL 33782			
El Number	: FEI Number Applied For (X)	FEI Number Not Applicable ()	Certificate of Status Desired ()	
lame and	d Address of Current Registered Agent:	Name and Address of	f New Registered Agent:	
	OMAS E HWY 19 NORTH S PARK, FL 33782 US			
ha abaya				
	e named entity submits this statement for the e of Florida.	purpose of changing its registere	d office or registered agent, or both,	
n the State	e of Florida.	purpose of changing its registere	d office or registered agent, or both,	
the State	e of Florida.		d office or registered agent, or both, Date	
n the State	e of Florida. ´ RE:	gent		
n the State SIGNATUI DFFICER ittle: lame: ddress:	e of Florida. RE:Electronic Signature of Registered A	gent	Date	
n the State BIGNATUI DFFICER Title: lame: lame: lity-St-Zip: Title: lame: lame: lame: lame:	e of Florida. RE: Electronic Signature of Registered A S AND DIRECTORS: D () Delete BABB, JOHN H 8900 US HWY 19 NORTH	gent ADDITIONS/CHANGI Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR	
n the State	e of Florida. RE: Electronic Signature of Registered A S AND DIRECTORS: D () Delete BABB, JOHN H 8900 US HWY 19 NORTH PINELLAS PARK, FL 33782 D () Delete CORRY, ROBERT D 3785 105TH AVE N	gent ADDITIONS/CHANGI Title: Name: Address: City-St-Zip: Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR () Change () Addition	

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: THOMAS E. TEEL D 04/30/2009