

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000010388

FILED
May 04, 2009
Secretary of State

Entity Name: KID FINDERS NETWORK, INC.

Current Principal Place of Business:

1740 E ROAD
SUITE B
LOXAHATCHEE, FL 33470

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 212306
WEST PALM BEACH, FL 33421

New Mailing Address:

P.O. BOX 212306
WEST PALM BEACH, FL 33421

FEI Number: 20-5764303 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MILSTEAD, SHERRI
1740 E ROAD
SUITE B
LOXAHATCHEE, FL 33470 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: P,T () Delete
Name: MILSTEAD, DENNIS W
Address: 1740 E ROAD
City-St-Zip: LOXHATCHEE, FL 33470

Title: VP,S () Delete
Name: MILSTEAD, SHERRI J
Address: 1740 E ROAD
City-St-Zip: LOXAHATCHEE, FL 33470

Title: DIR () Delete
Name: KONNERTH, LAURIE
Address: 1740 E ROAD
City-St-Zip: LOXAHATHCEE, FL 33470

Title: DIR () Delete
Name: RIDDLE, JAMES
Address: 1740 E ROAD
City-St-Zip: LOXAHATCHEE, FL 33470

Title: DIR () Delete
Name: SAMUELS, HARLEE A
Address: 1740 E ROAD
City-St-Zip: LOXAHATCHEE, FL 33470

Title: DIR () Delete
Name: MCCANDLESS, SHERI
Address: 1740 E ROAD
City-St-Zip: LOXAHATCHEE, FL 33470

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: DIR (X) Change () Addition
Name: MCCANDLESS, SHERI
Address: 1740 E ROAD
City-St-Zip: LOXAHATHCEE, FL 33470

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

Title: DIR (X) Change () Addition
Name: TINELLI, LINDA
Address: 1740 E ROAD
City-St-Zip: LOXAHATCHEE, FL 33470

Title: DIR (X) Change () Addition
Name: GROOVER, KAREN
Address: 1740 E ROAD
City-St-Zip: LOXAHATCHEE, FL 33470

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: SHERRI MILSTEAD

DIR

05/04/2009

Electronic Signature of Signing Officer or Director

Date