2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT DOCUMENT # N07000005191

FILED Aug 04, 2008 8:00 am Secretary of State

1. Entity Nam 107. A1A		FOR KIDS, INC.						08-1	J4-2008 90034 033	01.2	23
1871 PLANTATION CIRCLE SE 187			1871 F	ling Address 71 PLANTATION CIRCLE SE LM BAY, FL 32909			I INNIHAL ALL PRITE	roon sam sam sam sam sign	P i rk ar i rum amemo ri	adbi bi iyyi	
2. Principal Place of Business - No P.O. Box # 3. M			3. Mailing	. Mailing Address 8035 SPYGLASS HILL RD							
				Suite, Apt. #, etc.				07302008 CI	ng-NP CR2E03	37 (12/06)	
City & State			MEL	City & Stale MELBOURNE FL				"a" a" a b b b b b b b b b			pplied For ot Applicable
			940			5. Certificate of Status Desired					
6. Name and Address of Current Registered				1 Agent Name				7. Name and Address of New Registered Agent			
VICKERY, TIM 1871 PLANTATION CIRCLE SE PALM BAY, FL 32909						Street Address (P.O. Box Number is Not Acceptable)					
				City					FL	Zip Cod	te e
	named entiti ions of regist	y submits this statement fo tered agent.	r the purpos	e of changing its	registere	ed office or	registere	ed agent, or both, in		lamiliar with,	, and accept
SIGNATURE .		or printed name of registered agent	and title if applica	ible. (NOT	E: Registere	d Agent signatu	are required	when reinstating)	DATE		
Filing Fee is \$61.25 Due by September 12, 2008											
D	-		T	9. Election Car Trust Fund (\$5.00 May Be Added to Fees	Make checi Florida Depar		
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memory centry that the information supplied with this minig obes not quality for the exemptions contained in Chapter 119, inforce outlines. Further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: .

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

321-757-2020 Daytime Phone #