## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07000005191

Entity Name: 107. A1A'S TOYS FOR KIDS, INC.

FILED Jan 16, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1871 PLANTATION CIRCLE SE PALM BAY, FL 32909 **Current Mailing Address: New Mailing Address:** 8035 SPYGLASS HILL RD MELBOURNE, FL 32940 FEI Number: 26-0221472 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: VICKERY, TIM 1871 PLANTATION CIRCLE SE PALM BAY, FL 32909 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete VICKERY, DAVID T Name: Name: 1871 PLANTATION CIRCLE SE Address: Address: PALM BAY, FL 32909 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition Name: VICKERY, CANDACE D Name: Address: 1871 PLANTATION CIRCLE SE Address: City-St-Zip: PALM BAY, FL 32909 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition KREUL, JULIAN Name: KREUL, JULIANA Name: 1871 PLANTATION CIRCLE SE 8035 SPYGLASS HILL ROAD Address: Address: City-St-Zip: PALM BAY, FL 32909 City-St-Zip: MELBOURNE, FL 32940 Title: () Delete Title: () Change () Addition Name: MARTIN, DARLENE Name: Address: 1757 SOPHIAS DR. UNIT 104, Address: City-St-Zip: MELBOURNE, FL 32940 City-St-Zip: Title: () Delete Title: () Change () Addition ABRUZZO-PRICE, THERESA Name: Name: 11 WINCOVE LANE Address: Address: City-St-Zip: ROCKLEDGE, FL 32955 City-St-Zip: Title: () Delete Title: () Change () Addition ROGER, PHILICIA Name: Name: Address: 737 HARTSDALE AVE SW Address:

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.

City-St-Zip:

SIGNATURE: JULIANA KREUL T 01/16/2009

PALM BAY, FL 32908

City-St-Zip: