2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 19, 2008
Secretary of State

DOCUMENT# N07000009226

Entity Name: LAKE WORTH PARENT GROUP, INC.

Current Principal Place of Business:

1699 WINGFIELD ST.
LAKE WORTH, FL 33460

New Principal Place of Business:

Current Mailing Address:

1699 WINGFIELD ST.
LAKE WORTH, FL 33460

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
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:

GONZALEZ, MARY JANE
2791 FLORIDA MANGO RD.
LAKE WORTH, FL 33461 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: C ( ) Delete
Name: COLOSIMO, JORDAN
Address: 6060 STRAWBERRY LAKES CIR. PL
City-St-Zip: LAKE WORTH, FL 33463

Title: VC ( ) Delete
Name: LOWE, STEPHAINE
Address: 1728 18TH AVE., N.
City-St-Zip: LAKE WORTH, FL 33460

Title: T ( ) Delete
Name: PEARSONS, TANECHA
Address: 945 N. RIDGE RD.
City-St-Zip: LANTANA, FL 33462

Title: S ( ) Delete
Name: BENOIT, HENMARIE
Address: 1200 BROADWAY, #109
City-St-Zip: LANTANA, FL 33462

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: MARY JANE GONZALEZ MS 05/19/2008
Electronic Signature of Signing Officer or Director — Date