

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000008491

FILED
Apr 30, 2009
Secretary of State

Entity Name: ANALIYAH FOR KIDZ FOUNDATION, INC.

Current Principal Place of Business:

9601 NW 72 STREET
TAMARAC, FL 33321

New Principal Place of Business:

Current Mailing Address:

9601 NW 72 STREET
TAMARAC, FL 33321

New Mailing Address:

FEI Number: 90-0413826

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLINTON, ANNMARIE
9601 NW 72 STREET
TAMARAC, FL 33321 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: PTD () Delete
Name: CLINTON, ANNMARIE
Address: 9601 NW 72 STREET
City-St-Zip: TAMARAC, FL 33321

Title: SD () Delete
Name: SMITH, ALISON
Address: 9601 NW 72 STREET
City-St-Zip: TAMARAC, FL 33321

Title: D () Delete
Name: WILLIAMS, ARLENE
Address: 9601 NW 72 STREET
City-St-Zip: TAMARAC, FL 33321

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: GRAHAM, DONNETTE
Address: 9601 NW 72 STREET
City-St-Zip: TAMARAC, FL 33321

Title: D () Change (X) Addition
Name: ELLINGTON, YASHIMABET
Address: 9601 NW 72ND STREET
City-St-Zip: TAMARAC, FL 33321

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: ANNMARIE CLINTON

PTD

04/30/2009

Electronic Signature of Signing Officer or Director

Date