

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000009904

FILED  
Mar 09, 2009  
Secretary of State

Entity Name: KIDZ 'N' KABOODLE ACADEMY, INC.

## Current Principal Place of Business:

5760 ROCK ISLAND ROAD  
APT. 8-335  
TAMARAC, FL 33319

## New Principal Place of Business:

## Current Mailing Address:

5760 ROCK ISLAND ROAD  
APT. 8-335  
TAMARAC, FL 33319

## New Mailing Address:

FEI Number: 26-3467678      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

SAMPSON, TASHANDA  
5760 ROCK ISLAND ROAD  
APT. 8-335  
TAMARAC, FL 33319 US

## Name and Address of New Registered Agent:

SAMPSON, TASHANDA L  
5760 ROCK ISLAND ROAD  
APT. 8-335  
TAMARAC, FL 33319 US

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: TASHANDA LYNETTE SAMPSON

03/09/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete  
Name: SAMPSON, TASHANDA  
Address: 5760 ROCK ISLAND ROAD #8-335  
City-St-Zip: TAMARAC, FL 33319

Title: TD ( ) Delete  
Name: JOHNSON, LORENZO L  
Address: 5760 ROCK ISLAND ROAD #8-335  
City-St-Zip: TAMARAC, FL 33319

Title: D ( ) Delete  
Name: GRANT, CASSANDRA  
Address: 8165 N. UNIVERSITY DRIVE #42  
City-St-Zip: TAMARAC, FL 33321

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

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition  
Name: JOHNSON, LORENZO L  
Address: 5760 ROCK ISLAND ROAD #8-335  
City-St-Zip: TAMARAC, FL 33319

Title: TD (X) Change ( ) Addition  
Name: WILSON, CHEZTABNIKA  
Address: 2771 NW 24TH COURT  
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: D ( ) Change (X) Addition  
Name: MCDONALD, SONIA  
Address: 2017 NW 46TH AVENUE  
City-St-Zip: LAUDERHILL, FL 33313

Title: D ( ) Change (X) Addition  
Name: HODGE, NICOLE  
Address: 6143 SW 40TH COURT  
City-St-Zip: MIRAMAR, FL 33023

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: TASHANDA LYNETTE SAMPSON

PSD

03/09/2009

Electronic Signature of Signing Officer or Director

Date