

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000011513

FILED
Feb 22, 2009
Secretary of State

Entity Name: TIM'S KIDS, INC.

Current Principal Place of Business:

5057 BENNINGTON PLACE
VIERA, FL 32955

New Principal Place of Business:

Current Mailing Address:

5057 BENNINGTON PLACE
VIERA, FL 32955

New Mailing Address:

FEI Number: 26-3922968

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

NINKO, RICHARD M
720 ROY WALL BLVD.
ROCKLEDGE, FL 32955 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: D () Delete
Name: SZYMULA, SUSAN E
Address: 5057 BENNINGTON PLACE
City-St-Zip: VIERA, FL 32955

Title: D () Delete
Name: O'NEIL, GARY
Address: 4110 SAVANNAHS TRAIL
City-St-Zip: MERRITT ISLAND, FL 32953

Title: D () Delete
Name: MCEWAN, ROBERT
Address: 2 RUE FORBES STE ANNE DE BELLEVUE
City-St-Zip: QUEBEC, CANADA H-X 1W8, OC

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change () Addition
Name: SZYMULA, SUSAN E
Address: 5057 BENNINGTON PLACE
City-St-Zip: VIERA, FL 32955

Title: S (X) Change () Addition
Name: O'NEIL, GARY
Address: 4110 SAVANNAHS TRAIL
City-St-Zip: MERRITT ISLAND, FL 32953

Title: D (X) Change () Addition
Name: MCEWEN, ROBERT
Address: 2 RUE FORBES STE ANNE DE BELLEVUE
City-St-Zip: QUEBEC, CANADA H-X 1W8, XX 99999 XX

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: SUSAN E. SZYMULA

PT

02/22/2009

Electronic Signature of Signing Officer or Director

Date