2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N38604

FILED Feb 23, 2006 Secretary of State

Entity Name: KIDS IN DADE SOCIETY, INC.

Current Principal Place of Busin	ess: New	Principal Place of Business:
P O BOX 450146 MIAMI, FL 33245 US		
Current Mailing Address:	New	Mailing Address:
P O BOX 450146 MIAMI, FL 33245 US		
FEI Number: 65-0231613 FEI Num	ber Applied For () FEI Number No	t Applicable () Certificate of Status Desired ()
Name and Address of Current Re	egistered Agent: Name	and Address of New Registered Agent:
ZELLER, ALLEN 181 ISLAND DR KEY BISCAYNE, FL 33149 US	1982 NOR	ER, RAYMOND NE 147 TERRACE IH MIAMI, FL 33181 US
The above named entity submits th in the State of Florida.	is statement for the purpose of chan	ging its registered office or registered agent, or both,
SIGNATURE: RAYMOND ZELLEF	₹	02/23/2006
Electronic Signatu	re of Registered Agent	Date
OFFICERS AND DIRECTORS:	ADD	TIONS/CHANGES TO OFFICERS AND DIRECTORS
Title: PD () Delete Name: TINSMAN, RUTH A Address: 640 SW 49TH STREET City-St-Zip: HEALEAH, FL 33013	Title: Name: Addres City-Si	
Title: VPD () Delete Name: O'NEIL, FRANK Address: 1200 NW 6TH STREET City-St-Zip: MIAMI, FL 33136	Title: Name: Addres City-Si	s: 20100 W COUNTRY CLUB DR., #202
Title: SD () Delete Name: ZELLER, ALLEN Address: 181 ISLAND DR City-St-Zip: KEY BISCAYNE, FL 33149	Title: Name: Addree City-Si	s: 11289 SW 88 ST
Title: T () Delete Name: SINDELAR, EDWARD Address: 5595 SW 80TH STREET City-St-Zip: MIAMI, FL 33143	Title: Name: Addres City-Si	
Title: () Delete Name: Address: City-St-Zip:	Title: Name: Addres City-St	

I hereby certify that the information supplied with this filing does not qualify for the 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: RUTH TINSMAN PD 02/23/2006