

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42208

FILED  
Jan 13, 2011  
Secretary of State

**Entity Name:** AMI KIDS SOUTHWEST FLORIDA, INC.

**Current Principal Place of Business:**

SOUTHWEST FLORIDA MARINE INSTITUTE  
1190 MAIN ST  
FORT MYERS BEACH, FL 33931

**New Principal Place of Business:**

AMIKIDS SOUTHWEST FLORIDA, INC.  
1190 MAIN ST  
FORT MYERS BEACH, FL 33931

**Current Mailing Address:**

ASSOCIATED MARINE INSTITUTES  
5915 BENJAMIN CENTER DRIVE  
TAMPA, FL 33634

**New Mailing Address:**

AMIKIDS, INC.  
5915 BENJAMIN CENTER DRIVE  
TAMPA, FL 33634

**FEI Number:** 59-3052865

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HULL, DAVID J  
SMITH, HULSEY, & BUSEY  
225 WATER STREET ST, SUITE #1800  
JACKSONVILLE, FL 32202 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  
Name: INGRAHAM, JOHN  
Address: 14220 ROYAL HARBOUR CT, #60  
City-St-Zip: FORT MYERS, FL 33908

Title: P  
Name: BURGESS, JACK  
Address: PO BOX 1503  
City-St-Zip: FORT MYERS, FL 33902

Title: S  
Name: GOODACRE, BETTY  
Address: 874 OAK STREET  
City-St-Zip: FORT MYERS BEACH, FL 33931

Title: T  
Name: METHENY, MARVIN  
Address: 1470 ROYAL PALM SQUARE BLVD  
City-St-Zip: FORT MYERS, FL 33919

Title: D  
Name: JORGENSEN, ERIK  
Address: 16151 BENTWOOD PALMS DRIVE  
City-St-Zip: FORT MYERS, FL 33908

Title: D  
Name: STANDER, O.B.  
Address: 5915 BENJAMIN CENTER DRIVE  
City-St-Zip: TAMPA, FL 33634

I hereby 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 all other like empowered.

SIGNATURE: O.B. STANDER

D

01/13/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date