

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000003706

FILED
May 17, 2007
Secretary of State

Entity Name: WONDERS FOUNDATION, INC.

Current Principal Place of Business:

308 WOODLAWN AVENUE
BELLEAIR, FL 33756

New Principal Place of Business:

Current Mailing Address:

308 WOODLAWN AVENUE
BELLEAIR, FL 33756

New Mailing Address:

FEI Number: 59-3339090 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HINEMAN, LAWRENCE
308 ROEBLING RD. N.
BELLEAIR, FL 33756 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: KIVETT, TARA
Address: 306 LIVE OAK LANE
City-St-Zip: LARGO, FL 33770

Title: D () Delete
Name: PLATT, MARGARET
Address: 308 WOODLAWN AVE
City-St-Zip: BELLEAIR, FL 33756

Title: D () Delete
Name: BLOOM, JENNIFER
Address: 2359 OVERBROOK AVE N
City-St-Zip: LARGO, FL 33770

Title: D () Delete
Name: GAIL, CURLEY
Address: 25 HIBISCUS ROAD
City-St-Zip: BELLEAIR, FL 33756

Title: D () Delete
Name: ROJEK, VERONICA
Address: 15015 ARBOR RESERVE CIRCLE
City-St-Zip: TAMPA, FL 33624

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: MARGARET PLATT

D

05/17/2007

Electronic Signature of Signing Officer or Director

Date