

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997  
AMOUNT DUE ON OR BEFORE 9/17/97: \$61.26 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.26).

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N95000005454 (2)

1. Corporation Name

KIDS IN DANGER OF SEXPLOITATION CORP.

Principal Place of Business

Mailing Address

1073 S HIAWASSEE ROAD #1012  
ORLANDO FL 32835

1073 S HIAWASSEE ROAD #1012  
ORLANDO FL 32835



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
11/16/1995

3a. Date of Last Report  
07/01/1996

2. Principal Place of Business

2a. Mailing Address

21 1218 Shelter Rock Rd.

26 1218 Shelter Rock Rd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State  
23 Orlando, FL

27 City & State  
28 Orlando, FL

24 Zip

25 Country

24 32835

25 USA

29 Zip

30 Country

29 32835

30 Orange

4. FEI Number  
26-2774336

Applied For  
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year intangible  
Personal Property Tax due June 30. ☐ Yes ☒ No N/A

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GIBBONS, MICHAEL R  
1073 SO HIAWASSEE RD #1012  
#1012  
ORLANDO FL 32835

81 Name

Michael R. Gibbons

82 Street Address (P.O. Box Number is Not Acceptable)

1218 Shelter Rock Rd

83

84 City

Orlando

FL

85 Zip Code

32835

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME GIBBONS, MICHAEL R  
STREET ADDRESS 1073 S HIAWASSEE ROAD #1012  
CITY-ST-ZIP ORLANDO FL 32835

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

1218 Shelter Rock Rd.

TITLE ☐ DELETE

NAME BRAY, RENE  
STREET ADDRESS 2324 TURPIN DR  
CITY-ST-ZIP ORLANDO FL

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME GAMBONE, SANDY  
STREET ADDRESS 35 SKYLINE DR  
CITY-ST-ZIP LAKE MARY FL 32746

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

SIGNATURE REQUIRED

9/8/97 (407) 843-4600

CR2E037 (4/97)