2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9600000078

FILED Feb 09, 2012 Secretary of State

Entity Name: KIDS HOUSE OF SEMINOLE, INC.

Current Principal Place of Business: New Principal Place of Business:

5467 NORTH RONALD REAGAN BLVD. SANFORD, FL 32773

Current Mailing Address: New Mailing Address:

5467 NORTH RONALD REAGAN BLVD. SANFORD, FL 32773

FEI Number: 59-3415005 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CRAWFORD, NANCY D WRIGHT, RACHEL

5467 NORTH RONALD REAGAN BLVD. 5467 NORTH RONALD REAGAN BLVD.

SANFORD, FL 32773 US SANFORD, FL 32773 US

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: RACHEL WRIGHT 02/09/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: C

Name: BERNSTEIN, MARIE Address: 2104 LAKE HAVE POINT City-St-Zip: LONGWOOD, FL 32779

Title: PC

Name: SMITH, GEORGE Address: PO BOX 471028

City-St-Zip: LAKE MONROE, FL 32747

Title: VC

 Name:
 MULLER, TOM

 Address:
 2600 TITAN ROW

 City-St-Zip:
 ORLANDO, FL 32809

Title: CE

Name: BOB, BURKE

Address: 1130 BUSINESS CENTER DRIVE

City-St-Zip: LAKE MARY, FL 32746

Title: S

Name: SEAY, STEPHEN
Address: 709 BALMORAL ROAD
City-St-Zip: WINTER PARK, FL 32789

Title: ED

Name: WRIGHT, RACHEL

Address: 5467 NORTH RONALD REAGAN BLVD.

City-St-Zip: SANFORD, FL 32773 US

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: MARIE BERNSTEIN C 02/09/2012