

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000001559

FILED  
Apr 21, 2005  
Secretary of State

Entity Name: METRO KIDS KONNECTION, INC.

## Current Principal Place of Business:

1196 KNOLL DRIVE WEST  
JACKSONVILLE, FL 32211

## New Principal Place of Business:

1196 KNOLL DRIVE WEST  
JACKSONVILLE, FL 32221

## Current Mailing Address:

1196 KNOLL DRIVE WEST  
JACKSONVILLE, FL 32211

## New Mailing Address:

1196 KNOLL DRIVE WEST  
JACKSONVILLE, FL 32221

FEI Number: 59-3433761

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LANE, TERRY M  
1196 KNOLL DRIVE WEST  
JACKSONVILLE, FL 32211 US

## Name and Address of New Registered Agent:

LANE, TERRY M  
1196 KNOLL DRIVE WEST  
JACKSONVILLE, FL 32221 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: TERRY M LANE

04/21/2005

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: LANE, TERRY M  
Address: 1196 KNOLL DRIVE WEST  
City-St-Zip: JACKSONVILLE, FL 32211

Title: D ( ) Delete  
Name: LANE, KATHRYN M  
Address: 1196 KNOLL DRIVE WEST  
City-St-Zip: JACKSONVILLE, FL 32211

Title: D ( ) Delete  
Name: BELL, QUINN A  
Address: 1602 TAYO LANE  
City-St-Zip: JACKSONVILLE, FL CLAY 32

Title: D ( ) Delete  
Name: ADAMS, SCOTT  
Address: 4070 HERSCHEL STREET  
City-St-Zip: JACKSONVILLE, FL 32205

Title: D ( ) Delete  
Name: GEORGE, DOYLE  
Address: 815 MAIN ST.  
City-St-Zip: JACKSONVILLE, FL DUVAL 32

Title: D ( ) Delete  
Name: HARGNET, KEVIN  
Address: 1428 WINDSOR PLACE  
City-St-Zip: JACKSONVILLE, FL DUVAL 32

## 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:

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: TERRY M LANE

PRES

04/21/2005

Electronic Signature of Signing Officer or Director

Date