## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N97000001559

Entity Name: METRO KIDS KONNECTION INC.

FILED Apr 30, 2009 Secretary of State

| analy Name: METRO ROBO ROTALE HON, INC.   |  |                                   |                                  |                                  |  |  |
|---|--|-----------------------------------|----------------------------------|----------------------------------|--|--|
| Current Principal Place of Business:  |  |                                   |                                  | New Principal Place of Business: |  |  |
|   | LL DRIVE WES<br>VILLE, FL 322                          |                                   |                                  |                                  |  |  |
| Current Mailing Address:  |  |                                   | Nev                              | New Mailing Address:             |  |  |
|   | LL DRIVE WES<br>VILLE, FL 322                          |                                   |                                  |                                  |  |  |
| FEI Number:   | 59-3433761   | FEI Number Applied For ( )        | FEI Number N                     | Not Appl                         | icable ( ) Certificate of Status Desired ( )   |  |
| Name and Address of Current Registered Agent: Name and Address of New Registered Agent: |  |                                   |                                  |                                  |  |  |
|   | RRY M<br>LL DRIVE WES<br>VILLE, FL 322                 |                                   |                                  |                                  |  |  |
| The above in the State  |  | submits this statement for the pu | ırpose of cha                    | inging it                        | ts registered office or registered agent, or both,   |  |
| SIGNATURE:  |  |                                   |                                  |                                  |  |  |
|   | Electron   | ic Signature of Registered Ager   | nt                               |                                  | Date   |  |
| OFFICERS AND DIRECTORS:   |  |                                   | ADI                              | DITION                           | IS/CHANGES TO OFFICERS AND DIRECTORS:  |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | D ()<br>LANE, TERRY I<br>1196 KNOLL DI<br>JACKSONVILLE | RIVE WEST                         | Title:<br>Name<br>Addre<br>City- | e:                               | () Change () Addition  |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | D ()<br>MACDONALD, I<br>1826 MANDARI<br>JACKSONVILLE   | N RD                              | Title:<br>Name<br>Addre<br>City- | e:                               | D (X) Change ( ) Addition<br>MACDONALD, RICHARD<br>3665 BRAMBLE ROAD<br>JACKSONVILLE, FL 32210 |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | D ()<br>BELL, QUINN A<br>1602 TAYO LAN<br>JACKSONVILLE | NE                                | Title:<br>Name<br>Addre<br>City- | e:                               | D (X) Change ( ) Addition<br>BELL, QUINN A<br>917 S. 1ST ST.<br>JACKSONVILLE BEACH, FL 32250   |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | D () ADAMS, SCOT 4070 HERSCHE JACKSONVILLE             | EL STREET                         | Title:<br>Name<br>Addre<br>City- | e:                               | () Change () Addition  |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | GEORGE, DOY<br>815 MAIN ST.                            | Delete<br>LE<br>E, FL DUVAL 32    | Title:<br>Name<br>Addre<br>City- | e:                               | D (X) Change ( ) Addition<br>GEORGE, DOYLE<br>815 MAIN ST.<br>JACKSONVILLE, FL 32207           |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | D ( )<br>HARGNET, KEV<br>691 CHERRY G<br>ORANGE PARK   | ROVE RD.                          | Title:<br>Name<br>Addre<br>City- | e:                               | D (X) Change ( ) Addition<br>HARGNET, KEVIN<br>691 CHERRY GROVE RD.<br>ORANGE PARK, FL 32073   |  |

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: TERRY M. LANE P 04/30/2009