

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Feb 09, 2006 08:00 AM
Secretary of State**

DOCUMENT # P03000029473		
1. Entity Name PAT'S KITZWORLD DEVELOPMENT CENTER INC.		
Principal Place of Business 1100 S EUSTIS ST EUSTIS, FL 32726	Mailing Address 1100 S EUSTIS ST EUSTIS, FL 32726	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent SCOTT, PATRICIA 1100 S EUSTIS ST EUSTIS, FL 32726		DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		000000426974 02/20/06-60056-001 158.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SCOTT, PATRICIA 1100 S EUSTIS ST EUSTIS, FL 32726	DO NOT WRITE IN THIS SPACE
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: <u>Patricia A. Scott</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date <u>2/6/06</u> Daytime Phone # <u>352-589-2990</u>



02062006 No Chg-P CR2E034 (11/05)

4. FEI Number 57-1154077	Applied For Not Applicable
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	