

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 18, 2008 08:00 AM
Secretary of State

DOCUMENT # P04000130452

1. Entity Name
CAN DO KIDS, INC.



Principal Place of Business
1273 KASS CIR
BROOKSVILLE, FL 34604

Mailing Address
1273 KASS CIR
BROOKSVILLE, FL 34604



01232008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-2224176	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GOOCH, LESLIE M
1273 KASS CIR
BROOKSVILLE, FL 34604

**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 reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

U000000629950
02/26/08 20063-016-150.00

10. OFFICERS AND DIRECTORS

TITLE DVS
NAME DAVIS, DIANE A
STREET ADDRESS 1273 KASS CIR
CITY-ST-ZIP BROOKSVILLE, FL 34604

TITLE DPT
NAME GOOCH, LESLIE M
STREET ADDRESS 1273 KASS CIR
CITY-ST-ZIP BROOKSVILLE, FL 34604

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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: Leslie M Gooch Director
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/15/08 7278088984
Date Daytime Phone #