## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P08000015464

Entity Name: GINA D'S KIDS CLUB, INC.

FILED Jan 19, 2009 Secretary of State

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

2005 TREE FORK LANE, STE. 101 362 CEDARCREST CT. LAKE MARY, FL 32746

Current Mailing Address: New Mailing Address:

2005 TREE FORK LANE, STE. 101 362 CEDARCREST CT. LAKE MARY, FL 32746

FEI Number: 26-2013915 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:

DIFRANCESCO, JOEY
2005 TREE FORK LANE, STE. 101
LONGWOOD, FL 32750 US

DIFRANCESCO, JOSEPH
362 CEDARCREST CT.
LAKE MARY, FL 32746 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: JOSEPH DIFRANCESCO 01/19/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title:

PTD () Delete DIFRANCESCO, JOEY

Name: DIFRANCESCO, JOEY
Address: 2005 TREE FORK LANE, STE. 101

City-St-Zip: LONGWOOD, FL 32750

 Title:
 SD ( ) Delete

 Name:
 DIFRANCESCO, BERNADETTE

 Address:
 2005 TREE FORK LANE, STE 101

 City-St-Zip:
 LONGWOOD, FL 32750

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change ( ) Addition

Name: DIFRANCESCO, JOSEPH Address: 362 CEDARCREST CT. City-St-Zip: LAKE MARY, FL 32746

Title: SD (X) Change ( ) Addition
Name: DIFRANCESCO, BERNADETTE
Address: 362 CEDARCREST CT.
City-St-Zip: LAKE MARY, FL 32746

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSEPH DIFRANCESCO PTD 01/19/2009