

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000014527

FILED
Jan 03, 2008
Secretary of State

Entity Name: KIDSTOP AT BOYNTON BEACH, INC.

Current Principal Place of Business:

200 TALCOTT AVE. S.
WATERTOWN, MA 02472 US

New Principal Place of Business:

200 TALCOTT AVE. S.
ATTN: NICHOLAS VALENTINE
WATERTOWN, MA 02472 US

Current Mailing Address:

200 TALCOTT AVE. S.
WATERTOWN, MA 02472 US

New Mailing Address:

FEI Number: 65-0394003 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LEGG, JACKIE
Address: 1490 GATEWAY BLVD.
City-St-Zip: BOYNTON BEACH, FL 33426

Title: T () Delete
Name: MEYER, ROBERT
Address: 1490 GATEWAY BLVD.
City-St-Zip: BOYNTON BEACH, FL 33426

Title: S () Delete
Name: FERNANDEZ, ANTONETTE
Address: 1490 GATEWAY BLVD.
City-St-Zip: BOYNTON BEACH, FL 33426

Title: V () Delete
Name: MENDEL, MARK
Address: 1490 GATEWAY BLVD.
City-St-Zip: BOYNTON BEACH, FL 33426

Title: D () Delete
Name: BURKE-AFONSO, MARY LOU
Address: 1490 GATEWAY BLVD.
City-St-Zip: BOYNTON BEACH, FL 33426 US

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:

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: ANTONETTE S. FERNANDEZ

S

01/03/2008

Electronic Signature of Signing Officer or Director

_____ Date