FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #
1. Corporation Name

P95000024986 (8)

KIDZ COACH, INC.

Principal Place of Business Mailing Address							, , , , , , , , , , , , , , , , , , , ,	94111 48					
2425 SW 3 AVE LOT 153 OCALA FL 34474			2425 SW 3 AVE LOT 153 OCALA FL 34474										
CONLA FE 39979			OUNCE IT STATE			03/27/1995				·			
2. Principal Place of B	usiness	-··-ı	Mailing Address	=			4. FEI Number	2 I			Applied For		
		26	Suite Apt. #, etc				24-2514 I	59-3319731			Not Applicable \$8.75 Additional		
Suite, Apt. #, etc.		27	Suite Apt. #, etc			5. Certificate of Status I	Desired	MO	-	e Required			
City & State			City & State				6. Election Campaign F	 inancing		\$5.	00 May Be		
23		28	,				Trust Fund Contribut	_			led to Fees		
Zip	Country		Zιρ	Co	untry		8. This corporation has			x under	s 199.032,		
24	25	29		[30]			Florida Statutes		s Z No				
9. N	ame and Address of Cur	rent Regis	stered Agent		-	T	10. Name and Address	of New	Registered	Agent			
1					81	Name							
RILEY, KAREN J			82 Street Ad			ddress (P.O. Box Number is No	t Accepta	able)					
2425 SW 3 A	/E				83								
LOT 153					63	ļ							
OCALA FL 34	474				84	City			FI	85	Zip Code		
SIGNATURE	accept the obligations of, S			Ville Argistics		al signat ve re	ganalista torslatig	- ·	DAIF				
12.	OFFICERS	AND DIREC		13			ADDITIONS/CHANG	ES TO OF					
TITLE			DELETE	1	THLE		PITID		ι	Chang	e 🙀 Addition		
NAME					NAME		Karen 2 Kiley	A 10. 4	1153				
STREET ADDRESS						1	Ocala, FL 34	ערט.	,,,,,				
THE			☐ DELETE		THE	ST Z:P	CUIGITE 34			Chang	je 🔲 Addition		
NAME.			L., Beerie		NAME	i					_		
STREET ADDRESS						T ADDRESS							
CITY-ST ZIP						ST ZIF							
TITLE			☐ DELETE	3 1	TITLE					∐ Chanç	ge Addition		
NAME				32	NAME								
STREET ACCRESS				33	STRES	ET ADDRESS							
CITY - ST - ZIP						\$1 - 71 ²				C3 C+	Addition		
TITLE			DELFTE		1111116					Chang	ge 🔲 Addition		
NAME					NAME								
STREET ADDRESS						T ADDRESS							
CITY-ST-ZIF			TT DELETE		- <u>VIII)</u> 1 T LE	ST - ZIP			-a	Chan	ge		
TITLE					NAME					D			
NAME						T ADDRESS							
STREET ADDRESS						ST-ZIP							
CITY-ST-ZIP TITLE			DELETE		1 TITLE					☐ Chan	ge 🔲 Addition		
NAME	•		E.J -	B	NAME								

14. Ido hereby certify that the information supplied with this filing is voluntarily furnished and does not quality for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an aridress

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

COLLY RIDGY PASSORT

1/96 (352)840-7085

CR2E034 (12/95)