2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000060119

Entity Name: DR. PLAYGROUND, INC.

FILED Apr 30, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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2851 POLK ST. 504 SOUTH 2ND STREET

HOLLYWOOD, FL 330204228 US JACKSONVILLE BEACH, FL 32250 US

Current Mailing Address: New Mailing Address:

PO BOX 840609 PO BOX 330067

PEMBROKE PINES, FL 330840609 US ATLANTIC BEACH, FL 32233 US

FEI Number: 65-0768355 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:

KROHN, I. MICHAEL III KROHN, I. MICHAEL III PO BOX 840609 S480 NW 40TH STREET

PEMBROKE PINES, FL 330840609 US CORAL SPRINGS, FL 33065 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: 04/30/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

 Name:
 KROHN, GLENEDA
 Name:
 KROHN, GLENEDA

 Address:
 2851 POLK STREET
 Address:
 9480 NW 40TH STREET

 City-St-Zip:
 HOLLYWOOD, FL 33020
 City-St-Zip:
 CORAL SPRINGS, FL 33065

Title: VPD () Delete Title: () Change () Addition

 Name:
 KROHN, MARLEE
 Name:

 Address:
 504 SOUTH 2ND STREET
 Address:

 City-St-Zip:
 JACKSONVILLE BEACH, FL 32250
 City-St-Zip:

Title: SD () Delete Title: SD (X) Change () Addition

Name: KROHN, MIKE Name: KROHN, MIKE

 Address:
 2851 POLK ST.
 Address:
 9480 NW 40TH STREET

 City-St-Zip:
 HOLLYWOOD, FL 33020
 City-St-Zip:
 CORAL SPRINGS, FL 33065

Title: TD () Delete Title: () Change () Addition

 Name:
 KROHN, TODD
 Name:

 Address:
 504 S SECOND ST
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32250
 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: GLENEDA KROHN P 04/30/2007