


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 13, 2005 8:00 am
Secretary of State

05-13-2005 90228 031 ***150.00

DOCUMENT # P98000098951 1. Entity Name KIDS LOVE US OF ORLANDO, INC.			
Principal Place of Business 4381 STEED TERR. WINTER PARK, FL 32792		Mailing Address 4381 STEED TERR. WINTER PARK, FL 32792	
2. Principal Place of Business 112 Avery Lake Drive Suite, Apt. #, etc.		3. Mailing Address 112 Avery Lake Drive Suite, Apt. #, etc.	
City & State Winter Springs, FL Zip 32708 Country USA		City & State Winter Springs, FL Zip 32708 Country USA	
4. FEI Number 59-3545673		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		04252005 Chg-P CR2E034 (10/03)	
6. Name and Address of Current Registered Agent PETRIE, COLEMAN A 4381 STEED TERR. WINTER PARK, FL 32792		7. Name and Address of New Registered Agent Name <u>Petrie, Coleman A.</u> Street Address (P.O. Box Number is Not Acceptable) <u>112 Avery Lake Drive</u> City <u>Winter Springs</u> FL <u>32708</u>	
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 <u>Coleman Alan Petrie, Jr</u> <u>Coleman Alan Petrie, Jr</u> DATE <u>5/10/05</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D <input type="checkbox"/> Delete PETRIE, COLEMAN 4381 STEED TERR. WINTER PARK, FL 32792	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <u>112 Avery Lake Drive</u> <u>Winter Springs, FL 32708</u>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P <input type="checkbox"/> Delete PETRIE, ELIZABETH A 4381 STEED TERR. WINTER PARK, FL 32792	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <u>112 Avery Lake Drive</u> <u>Winter Springs, FL 32708</u>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 another like empowered.			
SIGNATURE: <u>Coleman Alan Petrie, Jr</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date <u>5/10/05</u> Daytime Phone # <u>321-277-7061</u>	

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