

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000016750

FILED
Jan 18, 2007
Secretary of State

Entity Name: CHILD'S PLAY OF NORTHWEST FLORIDA, INC.

Current Principal Place of Business:

5100 NORTH 9 AVENUE
PENSACOLA, FL 32504

New Principal Place of Business:

Current Mailing Address:

3751 VICTORIAN BLVD
GULF BREEZE, FL 32563

New Mailing Address:

1156 BAYVIEW LANE
GULF BREEZE, FL 32563

FEI Number: 59-3569859

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WESTMORELAND, SHANNON L
3751 VICTORIAN BLVD
GULF BREEZE, FL 32563 US

Name and Address of New Registered Agent:

WESTMORELAND, SHANNON L
1156 BAYVIEW LANE
GULF BREEZE, FL 32563 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: SHANNON WESTMORELAND

01/18/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CFO () Delete
Name: WESTMORELAND, SHANNON L
Address: 3751 VICTORIAN BLVD
City-St-Zip: GULF BREEZE, FL 32563

Title: VPO () Delete
Name: WESTMORELAND, SHANNON L
Address: 3751 VICTORIAN BLVD
City-St-Zip: GULF BREEZE, FL 32563

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CFO (X) Change () Addition
Name: WESTMORELAND, SHANNON L
Address: 1156 BAYVIEW LANE
City-St-Zip: GULF BREEZE, FL 32563

Title: VPO (X) Change () Addition
Name: WESTMORELAND, SHANNON L
Address: 1156 BAYVIEW LANE
City-St-Zip: GULF BREEZE, FL 32563

I hereby certify that the information supplied with this filing does not qualify for the 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: SHANNON WESTMORELAND

CFO

01/18/2007

Electronic Signature of Signing Officer or Director

Date