

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000841

Entity Name: KID FOCUS, INC.

Current Principal Place of Business:

5920 ALMOND TER.
PLANTATION, FL 33317

Current Mailing Address:

5920 ALMOND TER.
PLANTATION, FL 33317

FEI Number: 65-0979929

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHOATE, GAIL LPRES
5920 ALMOND TERR.
PLANTATION, FL 33318 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: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title D
Name CHOATE, GAIL
Address 5920 ALMOND TERR.
City-State-Zip: PLANTATION FL 33317

Title D
Name KOPTONAK, IMELDA
Address 184 MILE CREEK ROAD
City-State-Zip: OLD LYME CT 06371

Title D
Name AMPS, JAMES
Address P.O. BOX 820231
City-State-Zip: PEMBROKE PINES FL 33082

Title D
Name CLARK, PAMELA L
Address 2400 E. COMMERCIAL BLVD. SUITE
820
City-State-Zip: FT. LAUDERDALE FL 33308

Title D
Name KING, BRIAN
Address 600 SE 3RD AVE 11TH FLOOR
City-State-Zip: FORT LAUDERDALE FL 33301

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GAIL CHOATE

PRESIDENT

01/26/2015

Electronic Signature of Signing Officer/Director Detail

Date