

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000008090

**Entity Name:** THE TOYMAKERS, INC.**Current Principal Place of Business:**9022 SR 52  
UNITS 51-52  
NEW PORT RICHEY, FL 34654**Current Mailing Address:**4816 FORT PECK ROAD  
NEW PORT RICHEY, FL 34655**FEI Number:** 36-4591821**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**LECZNAR, ROBERT NESQ.  
5922 MAIN STREET  
NEW PORT RICHEY, FL 34654 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	VD
Name	ERNST, JOE
Address	2705 LAKE HAVEN DR.
City-State-Zip:	NEW PORT RICHEY FL 34655

Title	SD
Name	ANDERSON, HERBERT
Address	4320 ANCONDA DR
City-State-Zip:	NEW PORT RICHEY FL 34655

Title	PD
Name	COCCIA, WILLIAM L
Address	4816 FORT PECK ROAD
City-State-Zip:	NEW PORT RICHEY FL 34655

Title	TD
Name	HANSEN, CARL
Address	10518 MIRACLE LANE
City-State-Zip:	NEW PORT RICHEY FL 34654

Title	D
Name	RUSSELL, MAC
Address	30 DEER PATH CT
City-State-Zip:	OLDSMAR FL 34677

Title	D
Name	MISHLER, RONALD
Address	8834 SCHRADER BLVD
City-State-Zip:	PORT RICHEY FL 34668

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:** CARL A. HANSEN**TREASURER****03/24/2014**

Electronic Signature of Signing Officer/Director Detail

Date