

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000005646

**Entity Name:** MADISON AVENUE FOR KIDS, INC.

**Current Principal Place of Business:**

4301 SOUTH FLAMINGO RD  
SUITE #106 - 142  
DAVIE, FL 33330

**Current Mailing Address:**

4301 SOUTH FLAMINGO RD  
SUITE #106 - 142  
DAVIE, FL 33330 US

**FEI Number:** 57-1181407

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

ARS & ASSOCIATES INC  
20810 WEST DIXIE HIGHWAY  
NORTH MIAMI BEACH, FL 33180 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 PD  
Name MADISON, SAMUEL A  
Address 4301 SOUTH FLAMINGO RD  
SUITE #106 - 142  
City-State-Zip: DAVIE FL 33330

Title DIR  
Name MCDONNELL, JAMIE A  
Address 4301 SOUTH FLAMINGO RD  
SUITE #106 - 142  
City-State-Zip: DAVIE FL 33330

Title DIR  
Name BARNES, KARLOS A  
Address 4301 SOUTH FLAMINGO RD  
SUITE #106 - 142  
City-State-Zip: DAVIE FL 33330

*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:** SAMUEL A MADISON JR

**PRESIDENT**

**04/13/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date