

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000008036

**Entity Name:** LITTLE KIDS ORGANIZATION INC.

**Current Principal Place of Business:**

8288 GROVELAND AVENUE  
PENSACOLA, FL 32534

**Current Mailing Address:**

8288 GROVELAND AVENUE  
PENSACOLA, FL 32534

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** Yes

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

ROME, JOVANA  
8288 GROVELAND AVENUE  
PENSACOLA, FL 32534 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 ROME, JOVANA  
Address 8288 GROVELAND AVENUE  
City-State-Zip: PENSACOLA FL 32534

Title SD  
Name WILLIAMS, KYNEISHA  
Address 8288 GROVELAND AVENUE  
City-State-Zip: PENSACOLA FL 32534

Title T  
Name WILLIAMS, ARTHELA R  
Address 1717 LEPLEY RD  
City-State-Zip: PENSACOLA FL 32534

Title D  
Name HUTCHINSON, SHANDELL  
Address 869 N HWY 29, APT. 49  
City-State-Zip: CANTONMENT FL 32533

*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:** JOVANA ROME

LITTLE KIDS  
ORGANIZATION INC.

01/25/2013

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

\_\_\_\_\_  
Date