

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N17000003116

**Entity Name:** TORAHVILLE4KIDZ, INC

**Current Principal Place of Business:**

829 FAULL DR  
UNIT A  
ROSKLEDGE, FL 32955

**Current Mailing Address:**

829 FAULL DR  
UNIT A  
ROSKLEDGE, FL 32955

**FEI Number:** 82-1274071

**Certificate of Status Desired:** No

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

LAMBERT, GARY K  
829 FAULL DR  
UNIT A  
ROCKLEDGE, FL 32955 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:** GARY K LAMBERT

07/16/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P, D  
Name LAMBERT, GARY K  
Address 829 FAULL DR UNIT A  
City-State-Zip: ROCKLEDGE FL 32955

Title D  
Name LAMBERT, TINA  
Address 829 FAULL DR UNIT A  
City-State-Zip: ROCKLEDGE FL 32955

Title D  
Name DESMOND, EISABETH  
Address 829 FAULL DR UNIT B  
City-State-Zip: ROCKLEDGE FL 32955

*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:** GARY K LAMBERT

CEO/PRESIDENT

07/16/2018

Electronic Signature of Signing Officer/Director Detail

Date