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FILED
Apr 29 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # F93000004683 (9)

1. Corporation Name
KIDSPORTS K.R.C., INC.



Principal Place of Business: **670 BONDED PARKWAY STREAMWOOD IL 60107**
 Mailing Address: **670 BONDED PARKWAY STREAMWOOD IL 60107-1839**

3. Date Incorporated or Qualified: **10/18/1993** 3a. Date of Last Report: **08/06/1996**

4. FEI Number: **36-3899956** Applied For: Not Applicable

5. Certificate of Status Desired: **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip 28 Zip Country 29 Country

24 25 29 30

9. Name and Address of Current Registered Agent

VALENTINO, NORBERT L
~~787 SO. NOVA RD.~~
ORMOND BEACH FL 32174

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)
2777 UNIVERSITY BLVD W

83

84 City: **JACKSONVILLE** FL 85 Zip Code: **32217**

11. Pursuant to the provisions of Sections 607.0102 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *William A. Valentino* **WILLIAM A. VALENTINO V.P.** **4/16/97**

Signature, type for printed name of registered agent and date of signature. (NOTE: Registered Agent's signature required when re-appointing.)

12. OFFICERS AND DIRECTORS

TITLE	CD	<input type="checkbox"/> DELETE
NAME	VALENTINO, NORBERT L	
STREET ADDRESS	209 CLUB CIRCLE	
CITY-ST-ZIP	BARRINGTON IL 60010	
TITLE	VCD	<input type="checkbox"/> DELETE
NAME	VALENTINO, WILLIAM A	
STREET ADDRESS	209 CLUB CIRCLE	
CITY-ST-ZIP	BARRINGTON IL 60010	
TITLE	D	<input type="checkbox"/> DELETE
NAME	LAGAMBINA, JASPER	
STREET ADDRESS	25 W 120 SCHICK RD	
CITY-ST-ZIP	BLOOMINGDALE IL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	CASCIO, SAMUEL J DR.	
STREET ADDRESS	28 GREYSTONE LANE	
CITY-ST-ZIP	N. BARRINGTON IL 60010	
TITLE	P	<input type="checkbox"/> DELETE
NAME	VALENTINO, LINDA L	
STREET ADDRESS	209 CLUB CIRCLE	
CITY-ST-ZIP	BARRINGTON IL 60010	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *William A. Valentino* **WILLIAM A. VALENTINO** **4/16/97** (630) 289-2626

CR2E034 (9/96)