

N000707289
Date Filed: 5/11/2022
John R. Ashcroft
Missouri Secretary of State

*** SECTION 1, 3 & 4 ARE REQUIRED**

REPORT DUE BY: 8/31/2022

N000707289
All Nanna's Kids Closet, Inc.
ANNA MARIE WARFIELD
1329 CROSSINGS CRT UNIT A
BALLWIN MO 63021

	ORGANIZED UNDER THE LAWS OF: <u>Missouri</u>	
1	PRINCIPAL PLACE OF BUSINESS OR CORPORATE HEADQUARTERS: *	
	<u>1329 Crossings Ct</u> (Required)	
	<u>Unit A</u>	
	STREET	
	<u>Ballwin MO 63021</u>	
	CITY / STATE ZIP	

2 If changing the registered agent and/or registered office address, please check the appropriate box(es) and fill in the necessary information.

The new registered agent _____

IF CHANGING THE REGISTERED AGENT, AN ORIGINAL WRITTEN CONSENT FROM THE NEW REGISTERED AGENT MUST BE ATTACHED AND FILED WITH THIS REGISTRATION REPORT.

The new registered office address _____

Must be a Missouri address, PO Box alone is not acceptable. This section is not applicable for Banks, Trusts and Foreign Insurance.

	OFFICERS NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT ACCEPTABLE). MUST LIST PRESIDENT AND SECRETARY BELOW	A	BOARD OF DIRECTORS NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT ACCEPTABLE). MUST LIST AT LEAST THREE DIRECTORS BELOW	B
3	<u>PRESIDENT</u> Warfield, Anna STREET <u>1329 Crossings Ct</u> CITY/STATE/ZIP <u>Unit A</u> <u>Ballwin MO 63021</u>		<u>NAME</u> Woodie, Nicko STREET <u>4903 Heritage Heights Cir</u> CITY/STATE/ZIP <u>Hazelwood MO 63042-1594 USA</u>	
	<u>SECRETARY</u> Wyatt, Chea STREET <u>112 Chevy Chase Dr</u> CITY/STATE/ZIP <u>Belleville IL 62223</u>		<u>NAME</u> Taylor, Na'ila STREET <u>116 Ivo Dr</u> CITY/STATE/ZIP <u>Swansea IL 62226-4552 USA</u>	
	<u>TREASURER</u> Austin, Constance STREET <u>205 Melissa CT</u> CITY/STATE/ZIP <u>Apt A</u> <u>O'Fallon IL 62269</u>		<u>NAME</u> Huff, Denisa STREET <u>523 Aladar Dr</u> CITY/STATE/ZIP <u>O'Fallon IL 62269 USA</u>	
	STREET _____		<u>NAME</u> _____	
	CITY/STATE/ZIP _____		STREET _____	
			CITY/STATE/ZIP _____	
	NAMES AND ADDRESSES OF ALL OTHER OFFICERS AND DIRECTORS ARE ATTACHED			

4 The undersigned understands that false statements made in this report are punishable for the crime of making a false declaration under Section 575.060 RSMo. Photocopy or stamped signature not acceptable. *

Authorized party or officer sign here	<u>Anna Warfield</u>	(Required)
Please print name and title of signer:	<u>Anna Warfield</u> / <u>President</u>	
	NAME TITLE	

REGISTRATION REPORT FEE IS:
 ___\$10.00 If filed on or before 8/31/2022
 ___\$15.00 If filed after 9/30/2022

Corporation will be administratively dissolved if report is not filed by 11/29/2023

WHEN THIS FORM IS ACCEPTED BY THE SECRETARY OF STATE, BY LAW IT WILL BECOME A PUBLIC DOCUMENT AND ALL INFORMATION PROVIDED IS SUBJECT TO PUBLIC DISCLOSURE

E-MAIL ADDRESS (OPTIONAL): _____