2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2009
Secretary of State

DOCUMENT# 719147

Entity Name: YOUTH AND FAMILY ALTERNATIVES, INC.

Current Principal Place of Business:

7524 PLATHE RD
NEW PORT RICHEY, FL 346534520

New Principal Place of Business:

Current Mailing Address:

7524 PLATHE RD
NEW PORT RICHEY, FL 346534520

New Mailing Address:

FEI Number: 59-1545990 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

TORRENCE, ALFRED W JR
6645 RIDGE RD
PORT RICHEY, FL 34668 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: SMITH, JACK
Address: 1815 LITTLE ROAD
City-St-Zip: TRINITY, FL 34655

Title: D ( ) Delete
Name: TRASK, THOMAS J
Address: 595 MAIN ST.
City-St-Zip: DUNDEN, FL

Title: D ( ) Delete
Name: TORRENCE, ALFRED W
Address: 6709 RIDGE ROAD STE. 106
City-St-Zip: PORT RICHEY, FL 34668

Title: D ( ) Delete
Name: ROBERTS, DEBRA
Address: 7530 LITTLE ROAD
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: CD ( ) Delete
Name: BALKCOM, RICHARD
Address: 1747 PERCHERON DRIVE
City-St-Zip: TRINITY, FL 34655

Title: M ( ) Delete
Name: MAGRILL, GEORGE
Address: 7524 PLATHE ROAD
City-St-Zip: NEW PORT RICHEY, FL 34653

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CD (X) Change ( ) Addition
Name: BEKESH, RICHARD
Address: 3014 US HWY 19
City-St-Zip: HOLIDAY, FL 34691

Title: VCD (X) Change ( ) Addition
Name: ROBERTS, DEBRA
Address: 7530 LITTLE ROAD
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: S/T (X) Change ( ) Addition
Name: TORRENCE, ALFRED W
Address: 6709 RIDGE ROAD STE. 106
City-St-Zip: PORT RICHEY, FL 34668

Title: D (X) Change ( ) Addition
Name: BALKCOM, RICHARD
Address: 1747 PERCHERON DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: D (X) Change ( ) Addition
Name: TRASK, THOMAS
Address: 595 MAIN STREET
City-St-Zip: DUNEDIN, FL 34698

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: GEORGE MAGRILL CEO/PRES. M 04/17/2009

Electronic Signature of Signing Officer or Director — Date