

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002374

FILED  
Apr 28, 2009  
Secretary of State

Entity Name: YOUNG LION'S YOUTH ORGANIZATION, INC.

**Current Principal Place of Business:**

3612 E. MCBERRY ST.  
TAMPA, FL 33610

**New Principal Place of Business:**

**Current Mailing Address:**

3612 E. MCBERRY ST.  
TAMPA, FL 33610

**New Mailing Address:**

FEI Number: 59-3470021

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BRYANT, DEXTER ` SR.  
3612 E. MCBERRY ST.  
TAMPA, FL 33610 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: BRYANT, DEXTER SR.  
Address: 3612 E. MCBERRY ST.  
City-St-Zip: TAMPA, FL 33610

Title: D (X) Delete  
Name: BRYANT, CHRISTINE  
Address: 3612 E. MCBERRY ST.  
City-St-Zip: TAMPA, FL 33610

Title: D ( ) Delete  
Name: SMITH, TAMARA  
Address: 5711 TROY CT. #1-107  
City-St-Zip: TAMPA, FL 33610

Title: D ( ) Delete  
Name: CHAPMAN, BEN  
Address: 7802 GARRISON ST.  
City-St-Zip: TAMPA, FL 33617

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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: DEXTER BRYANT, SR.

PRES

04/28/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date