2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000010524

Entity Name: SAVING YOUNG HEARTS, INC.

FILED Apr 30, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2438 ALCLOBE CIRCLE OCOEE, FL 34761

Current Mailing Address: New Mailing Address:

2438 ALCLOBE CIRCLE OCOEE, FL 34761

FEI Number: 20-5727219 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

TRACI KRATISH, P.A.

141 NW 117TH TERRACE
PLANTATION, FL 33325 US

TRACI KRATISH, P.A.

16068 GLENCREST AVENUE
DELRAY BEACH, FL 33446 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: 04/30/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 D
 () Delete
 Title:
 P
 (X) Change () Addition

 Name:
 LOPEZ-ANDERSON, MARTHA E
 Name:
 LOPEZ-ANDERSON, MARTHA E

 Address:
 2438 ALCLOBE CIRCLE
 Address:
 2438 ALCLOBE CIRCLE

 City-St-Zip:
 OCOEE, FL 34761
 City-St-Zip:
 OCOEE, FL 34761

Title: D () Delete Title: S (X) Change () Addition
Name: ANDERSON, DANA A Name: ANDERSON, DANA A
Address: 2438 ALCLORE CIRCLE

Address: 2438 ALCLOBE CIRCLE Address: 2438 ALCLOBE CIRCLE
City-St-Zip: OCOEE, FL 34761 City-St-Zip: OCOEE, FL 34761

Title: D () Delete Title: T (X) Change () Addition Name: MIRANDA, ENID N Name: MIRANDA, ENID N

Address: 2422 ALCLOBE CIRCE Address: 2422 ALCLOBE CIRCE City-St-Zip: ORLANDO, FL 34761 City-St-Zip: ORLANDO, FL 34761

Title: () Delete Title: D () Change (X) Addition

 Name:
 Name:
 FISHER, MICHELL D

 Address:
 Address:
 200 ST. ANDREWS BLVD. UNIT 1002

Address: Address: 200 ST. ANDREWS BLVD. UNIT 1002
City-St-Zip: WINTER PARK, FL 32792

Title: () Delete Title: D () Change (X) Addition

Name: Name: OTTS, SUSAN B

Address: Address: 1098 SHIMMERING SAND DRIVE

City-St-Zip: City-St-Zip: OCOEE, FL 34761

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: MARTHA LOPEZ-ANDERSON P 04/30/2008