

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000005631

FILED
Apr 15, 2009
Secretary of State

Entity Name: THE ALLIANCE FOR GLBTQ YOUTH, INC.

Current Principal Place of Business:

1175 NE 125TH STREET
SUITE 510
MIAMI, FL 33161 US

New Principal Place of Business:

Current Mailing Address:

1175 NE 125TH STREET
SUITE 510
MIAMI, FL 33161 US

New Mailing Address:

FEI Number: 26-2799253 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRAIG, SHELLEY
520 SW 10TH ST
#2
MIAMI, FL 33130 US

Name and Address of New Registered Agent:

CRAIG, SHELLEY CEO
8911 COLLINS AVE
#1201
SURFSIDE, FL 33154 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: SHELLEY CRAIG 04/15/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DENTATO, MICHAEL
Address: 1251 NE 108TH ST #618
City-St-Zip: MIAMI, FL 33161 US

Title: VP () Delete
Name: TOBIAS, PACKER
Address: 3510 BISCAYNE BLVD, SUITE 205
City-St-Zip: MIAMI, FL 33137 US

Title: VP () Delete
Name: ADLER, RANDI
Address: 18999 BISCAYNE BLVD. #200
City-St-Zip: AVENTURA, FL 33180 US

Title: S () Delete
Name: CAVANAUGH, DONALD
Address: PO BOX 480299
City-St-Zip: FT. LAUDERDALE, FL 33348 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SMITH, MARK DR.
Address: SCHOOL OF SOCIAL WORK, 11300 NE 2ND AVENUE
City-St-Zip: MIAMI, FL 33161 US

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

Title: VP (X) Change () Addition
Name: MARTHELL, VIVIAN
Address: 180 NE 19TH ST
City-St-Zip: MIAMI, FL 33132 US

Title: S (X) Change () Addition
Name: SOTTILE, RACHEL
Address: 5275 SUNSET DRIVE
City-St-Zip: MIAMI, FL 33143 US

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: SHELLEY CRAIG CEO 04/15/2009

Electronic Signature of Signing Officer or Director Date