

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
May 04, 2009  
Secretary of State**

DOCUMENT# N08000006106

Entity Name: RENOVATIO YOUTH LEADERSHIP PROGRAM, INC.

**Current Principal Place of Business:**

709 EAST GULF BEACH DRIVE  
ST. GEORGE ISLAND  
EASTPOINT, FL 32328

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 626  
EASTPOINT, FL 32328

**New Mailing Address:**

FEI Number: 20-8680988      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

MENDEZ CATLIN, LOIS M DR.  
709 EAST GULF BEACH DRIVE  
EASTPOINT, FL 32328      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: ED      ( ) Delete  
Name: MENDEZ CATLIN, LOIS M DR.  
Address: 709 EAST GULF BEACH DRIVE  
City-St-Zip: EASTPOINT, FL 32328

Title: AED      ( ) Delete  
Name: ROSAS, REBEKAH MS.  
Address: 8 BRICE AVENUE  
City-St-Zip: MIDDLETON, ID 83644

Title: CFO      ( ) Delete  
Name: CATLIN, LIONEL DR.  
Address: 709 EAST GULF BEACH DRIVE  
City-St-Zip: EASTPOINT, FL 32328

**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:

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: LOIS MENDEZ CATLIN

ED

05/04/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date