

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000010524

**Entity Name:** SAVING YOUNG HEARTS, INC.

**Current Principal Place of Business:**

2438 ALCLOBE CIRCLE  
OCOEE, FL 34761

**Current Mailing Address:**

2438 ALCLOBE CIRCLE  
OCOEE, FL 34761

**FEI Number:** 20-5727219

**Certificate of Status Desired:** No

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

LOPEZ-ANDERSON, MARTHA E  
7512 DR PHILLIPS BLVD  
SUITE 50-415  
ORLANDO, FL 32819 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:** MARTHA E LOPEZ-ANDERSON

05/06/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name LOPEZ-ANDERSON, MARTHA E  
Address 2438 ALCLOBE CIRCLE  
City-State-Zip: OCOEE FL 34761

Title S  
Name ANDERSON, DANA A  
Address 2438 ALCLOBE CIRCLE  
City-State-Zip: OCOEE FL 34761

Title T  
Name MIRANDA, ENID N  
Address 2422 ALCLOBE CIRCE  
City-State-Zip: ORLANDO FL 34761

Title D  
Name FISHER, MICHELL D  
Address 200 ST. ANDREWS BLVD. UNIT 1002  
City-State-Zip: WINTER PARK FL 32792

Title VP  
Name BLANCO, RAFAEL F  
Address 2422 ALCLOBE CIRCLE  
City-State-Zip: OCOEE FL 34761

Title D  
Name DAVILA, ALAN R  
Address 2438 ALCLOBE CIRCLE  
City-State-Zip: OCOEE FL 34761

*I hereby 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 all other like empowered.*

**SIGNATURE:** MARTHA LOPEZ-ANDERSON

PRESIDENT

05/06/2016

Electronic Signature of Signing Officer/Director Detail

Date