

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000006265

**FILED**  
**Apr 29, 2022**  
**Secretary of State**  
**3701689795CC**

**Entity Name:** RECOGNIZING OUR YOUTH'S ABILITY TO LEAD THROUGHOUT THEIR YEARS INC.

**Current Principal Place of Business:**

309 SW 12TH AVE  
DANIA, FL 33004

**Current Mailing Address:**

309 SOUTH WEST 12TH AVE  
DANIA BEACH, FL 33004

**FEI Number:** 27-2787761

**Certificate of Status Desired:** Yes

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

DOCUMENTS CENTER INC.  
309 SOUTH WEST 12TH AVE  
DANIA BEACH, FL 33004 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title PD  
Name THOMPSON, JABRINA WFOUNDER  
Address 309 SOUTH WEST 12TH AVE.  
City-State-Zip: DANIA BEACH FL 33004

Title VPD  
Name CURRY, TANYA  
Address 705 NORTH WEST 6TH AVE.  
City-State-Zip: HALLANDALE FL 33009

Title TD  
Name BRACKIN, KAMISHIA  
Address 4850 SOUTH WEST 25TH STREET  
City-State-Zip: WEST PARK FL 33023

Title SD  
Name JOLICOEUR, CHRISTIE  
Address 2856 SOUTH WEST 11TH AVENUE  
City-State-Zip: MIRAMAR FL 33025

Title D  
Name CROSS, PANELLA  
Address 504 PHIPPEN ROAD #2  
City-State-Zip: DANIA BEACH FL 33004

Title D  
Name ROBINSON, REGINA  
Address 17520 NORTH WEST 27TH CT.  
City-State-Zip: MIAMI GARDENS FL 33056

*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:** JABRINA THOMPSON

**PRESIDENT**

**04/29/2022**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date