

**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
May 21, 2006  
Secretary of State**

DOCUMENT# 752028

Entity Name: SOUTHEAST REGIONAL YOUTH OF UNITY RETREAT CENTER,INC.

**Current Principal Place of Business:**

851 SW 3RD ST.  
BOCA RATON, FL 33486 US

**New Principal Place of Business:**

**Current Mailing Address:**

851 SW 3RD ST.  
BOCA RATON, FL 33486 US

**New Mailing Address:**

FEI Number: 59-2029834      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:**

HOROWITZ, TERRY  
851 S.W. 3RD ST.  
BOCA RATON, FL 33486 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: VD ( ) Delete  
Name: MARSHALL, BOB,  
Address: 3414 SUNRISE BLVD.  
City-St-Zip: FT. PIERCE, FL

Title: TD ( ) Delete  
Name: HOROWITZ, TERRY  
Address: 851 S.W. 3RD ST.  
City-St-Zip: BOCA RATON, FL 33486

Title: SD ( ) Delete  
Name: HEALD, TOM  
Address: 23 PINEVIEW DR  
City-St-Zip: HORSESHOE, NC

**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 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: TERRY HOROWITZ

TD

05/21/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date