

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 752028

FILED
May 22, 2003
Secretary of State

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 ()

Name and Address of Current Registered Agent:

HOROWITZ, TERRY
851 S.W. 3RD ST.
BOCA RATON, FL 33486

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 Section 119.07(3)(i), 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

05/22/2003

Electronic Signature of Signing Officer or Director

_____ Date