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:		New Principal Place	New Principal Place of Business:	
851 SW 3F BOCA RA	RD ST. TON, FL 33486	S US		
Current Mailing Address:		New Mailing Address:		
851 SW 3F BOCA RA	RD ST. TON, FL 33486	S US		
FEI Number	: 59-2029834	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	Address of C	urrent Registered Agent:	Name and Address o	of New Registered Agent:
10000011 1851 S.W. 3	TZ, TERRY BRD ST			
BOCA RA The above	TON, FL 33486 named entity s		ourpose of changing its registered	d office or registered agent, or both,
BOCA RATHE	TON, FL 33486 named entity se of Florida.		ourpose of changing its registered	d office or registered agent, or both,
BOCA RA The above	TON, FL 33486 named entity se of Florida. RE:			d office or registered agent, or both, Date
BOCA RA The above in the State SIGNATUI	TON, FL 33486 named entity se of Florida. RE:	ubmits this statement for the p	ent	
BOCA RA The above in the State SIGNATUI	named entity see of Florida. RE: Electroni	ubmits this statement for the posterior c Signature of Registered Age FORS: Delete B,	ent	Date
BOCA RA The above in the State SIGNATUI OFFICER: Title: Name: Address:	ron, FL 33486 named entity see of Florida. RE: Electroni S AND DIRECT VD () MARSHALL, BO 3414 SUNRISE FT. PIERCE, FL	ubmits this statement for the procession of Registered Age ORS: Delete B, BLVD. Delete RRY ST.	ent ADDITIONS/CHANGI Title: Name: Address:	Date ES TO OFFICERS AND DIRECTORS

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