2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762483

FILED Jul 20, 2009 Secretary of State

Entity Name: LARGO FOR YOUTH, INC.				
Current Principal Place of Business:		New Princ	ipal Place of Business:	
1621 PATL LARGO, FI	IN CIRCLE SOUTH L 33770			
Current Mailing Address:		New Maili	New Mailing Address:	
P.O. BOX 5 LARGO, FI				
FEI Number: 59-2222745 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: Name and Address of New Registered Agent:				
WATERS, 1621 PATL LARGO, FI The above	ZONALD IN CIR SO L 33770 US named entity submits this statement for the purpose			
in the State	e of Florida.			
SIGNATUR				
Electronic Signature of Registered Agent			Date	
OFFICERS AND DIRECTORS:		ADDITION	IS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () Delete WATERS, ZONALD 1621 PATLIN CIR SO LARGO, FL 33770	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () Delete GOSS, MELANIE 1546 GREENLEA DR. CLEARWATER, FL 33755 US	Title: Name: Address: City-St-Zip:	T (X) Change () Addition BEAL, STEVEN 1022 VIA MURANO CLEARWATER, FL 33764 US	
Title: Name: Address: City-St-Zip:	S () Delete TALBERT, STEPHANIE 2175-62ND STREET N APT 606 CLEARWATER, FL 33760	Title: Name: Address: City-St-Zip:	S/R (X) Change () Addition HARRIS, RITA 8418 LANTANA DR SEMINOLE, FL 33777	
Title: Name: Address: City-St-Zip:	AD () Delete HELM, JOHNIE 1399 BASKIN DRIVE LARGO, FL 33778	Title: Name: Address: City-St-Zip:	V (X) Change () Addition NATALIEN, BROWN 1201 SEMINOLE BLVD LARGO, FL 33770	
Title: Name: Address: City-St-Zip:	V (X) Delete NATALIEN, BROWN 1201 SEMINOLE BLVD # LARGO, FL 33770	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify 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: ZONALD WATERS **PRES** 07/20/2009