2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000005791

FILED Jun 29, 2005 Secretary of State

Entity Name: XPOSURE YOUTH FOUNDATION, INC.

Current P	rincipal Place of Business:	New Principal Place of Business:
	AKER CIRCLE , GA 30314	
Current N	lailing Address:	New Mailing Address:
	AKER CIRCLE , GA 30314	
In accordan	T: 36-4492031 FEI Number Applied For () noce with s. 607.193(2)(b), F.S., the corporation did in the second of th	·
Name and	d Address of Current Registered Agent:	Name and Address of New Registered Agent:
JAMES, LA TONOA 1420 NW 138 ST MIAMI, FL 33167 US		JAMES, LA TONDA 1420 NW 138 ST MIAMI, FL 33167 US
	e named entity submits this statement for the e of Florida.	purpose of changing its registered office or registered agent, or both,
SIGNATUI	RE: LATONDA JAMES	06/29/2005
	Electronic Signature of Registered A	gent Date
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR
Title: Name: Address: City-St-Zip:	P () Delete JAMES, LA TONDA 1420 NW 138 ST MIAMI, FL 33167	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	S () Delete JEFFERSON, CATINA 253 WHITAKER CIRCLE ATLANTA, GA 30314	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	T () Delete WHITTED-BRASWELL, TASHA 405 HANSON DURHAM, NC 27716	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	C () Delete FULTON, ANTHONY 127 PEACHTREE ST., STE 630 ATLANTA, GA 30303	Title: D (X) Change () Addition Name: LORNA, HOOD Address: 1838 CUMBERLAND VL PL City-St-Zip: SMYRNA, GA 30080
Title: Name: Address: City-St-Zip:	VC () Delete TAYLOR, STACI 416 ORCHARD WALK STONE MOUNTAIN, GA 30087	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	D () Delete TILLMAN, TODD 117 WEST PEACHTREE ST ATLANTA, GA 30313	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: LATONDA JAMES P 06/29/2005