

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000005791

FILED
May 09, 2006
Secretary of State

Entity Name: XPOSURE YOUTH FOUNDATION, INC.

Current Principal Place of Business:

253 WHITAKER CIRCLE
ATLANTA, GA 30314

New Principal Place of Business:

Current Mailing Address:

253 WHITAKER CIRCLE
ATLANTA, GA 30314

New Mailing Address:

FEI Number: 36-4492031 **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:

JAMES, LA TONDA
1420 NW 138 ST
MIAMI, FL 33167 US

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: P () Delete
Name: JAMES, LA TONDA
Address: 1420 NW 138 ST
City-St-Zip: MIAMI, FL 33167

Title: S () Delete
Name: JEFFERSON, CATINA
Address: 253 WHITAKER CIRCLE
City-St-Zip: ATLANTA, GA 30314

Title: T () Delete
Name: WHITTED-BRASWELL, TASHA
Address: 405 HANSON
City-St-Zip: DURHAM, NC 27716

Title: D () Delete
Name: LORNA, HOOD
Address: 1838 CUMBERLAND VL PL
City-St-Zip: SMYRNA, GA 30080

Title: VC () Delete
Name: TAYLOR, STACI
Address: 416 ORCHARD WALK
City-St-Zip: STONE MOUNTAIN, GA 30087

Title: D () Delete
Name: TILLMAN, TODD
Address: 117 WEST PEACHTREE ST
City-St-Zip: ATLANTA, GA 30313

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:

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: LATONDA JAMES

PRES

05/09/2006

Electronic Signature of Signing Officer or Director

Date