2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2005
Secretary of State

DOCUMENT# H16408

Entity Name: YOUTH IMAGES OF NORTH FLORIDA, INC.

Current Principal Place of Business:

1721 INDEPENDENCE BLVD STE A-1
SARASOTA, FL 34234

New Principal Place of Business:

1721 INDEPENDENCE BLVD
STE A-1
SARASOTA, FL 34234

Current Mailing Address:

1721 INDEPENDENCE BLVD STE A-1
SARASOTA, FL 34234

New Mailing Address:

1721 INDEPENDENCE BLVD
STE A-1
SARASOTA, FL 34234

FEI Number: 59-2451094 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

KOLEFF, MICHAEL
3813 71ST TERRACE EAST
SARASOTA, FL 34243 US

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: KOLEFF, MICHAEL G
Address: 3813 71ST TERRACE EAST
City-St-Zip: SARASOTA, FL

Title: V (X) Delete
Name: YOHO, TIMOTHY D
Address: 7048 JOHN WAYNE CT
City-St-Zip: TALLAHASSEE, FL 32305

Title: ST ( ) Delete
Name: KELLEMEN, CARLA L
Address: 3813 71ST TERRACE EAST
City-St-Zip: SARASOTA, FL 34243

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CARLA L. KELLEMEN ST 04/30/2005

Electronic Signature of Signing Officer or Director — Date