2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2008
Secretary of State

DOCUMENT# N00000003228

Entity Name: FIVE SMOOTH STONES YOUTH, INC.

Current Principal Place of Business:

8130 SAINT ALLBANDS DR.
ORLANDO, FL 32835

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 618326
ORLANDO, FL 32861

New Mailing Address:

FEI Number: 30-0043213 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILLIAMS, LARNCE S
8130 SAINT ALLBANDS DR.
ORLANDO, FL 32835 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

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: WILLIAMS, LARNCE S
Address: 8130 SAINT ALLBANDS DR.
City-St-Zip: ORLANDO, FL 32835

Title: S ( ) Delete
Name: WILLIAMS, LORETTA,
Address: 4563 CONLEY
City-St-Zip: ORLANDO, FL 32805

Title: S ( ) Delete
Name: WILLIAMS, RANDALL
Address: 8130 SAINT ALLBANDS DR.
City-St-Zip: ORLANDO, FL 32835

Title: T ( ) Delete
Name: RANDALL WILLIAMS LLL,
Address: 903 SOUTH GOLDWYN AVE.
City-St-Zip: ORLANDO, FL 32805

Title: O ( ) Delete
Name: SAMUEL OBED WILLIAMS,
Address: 7762 JAFFA DR.
City-St-Zip: ORLANDO, FL 32835

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change ( ) Addition
Name: WILLIAMS, RANDALL
Address: 8130 SAINT ALLBANDS DR.
City-St-Zip: ORLANDO, FL 32835

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 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: LARNCE S WILLIAMS PRES 04/27/2008

Electronic Signature of Signing Officer or Director — Date