

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**May 01, 2006 8:00 am**  
**Secretary of State**

05-01-2006 90308 002 \*\*\*\*61.25

**DOCUMENT # N00000005095**

1. Entity Name

Y.E.S. OPPORTUNITIES, INC.



Principal Place of Business

**WEBB**  
13889 DEL WEBB BLVD  
SPRUCE CREEK COUNTY CLUB  
SUMMERFIELD FL 34491

Mailing Address

**BB**  
13889 DEL WEBB BLVD  
SPRUCE CREEK COUNTY CLUB  
SUMMERFIELD FL 34491

2. Principal Place of Business

3. Mailing Address

**13889 Del Webb Blvd.**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

**Spruce Creek Country Club.**

City & State

City & State

**Summerfield, FL 34491**

Zip

Country

Zip

Country

4. FEI Number

**59-3656796**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

1st MOORE

CR2E037 (10/05)



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MICHAEL C NORVELL, ATTORNEY AT LAW  
1410 EMERSON STREET  
LEESBURG FL 34748**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25  
Due By May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PTD  
RICE-COBBS, DOROTHY  
13889 DEL WEBB BLVD  
SUMMERFIELD FL 34491 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VSD  
JEFFERSON, MARY  
9524 MIDLAND TURN  
UPPER MARLBORO MD 20772 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VD  
PAYNE, MARY  
8 EAST ALEXANDRIA OVERLOOK  
OXON HILL MD 20745 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VCBO  
HOLMES, PATRICIA ANNE  
4405 N INDIANHEAD RD  
HERNANDO FL 34442 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VSD -**  
**PRESTON E. Cobbs Jr.**  
**5200 MELWOOD PARK AVE.**  
**Upper Marlboro, Md. 20772** ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Dorothy Rice Cobbs**

**4/21/06**