

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Apr 13, 2012
Secretary of State

DOCUMENT# N00000006972

Entity Name: OVERTOWN YOUTH CENTER, INC.**Current Principal Place of Business:**450 NW 14TH STREET
MIAMI, FL 33136**New Principal Place of Business:****Current Mailing Address:**450 NW 14TH STREET
MIAMI, FL 33136**New Mailing Address:****FEI Number:** 65-1048896**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ALONZO MOURNING CHARITIES, INC.
450 NW 14TH STREET
MIAMI, FL 33136 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: DP
Name: MOURNING, ALONZO H JR.
Address: 450 NE 14TH STREET
City-St-Zip: MIAMI, FL 33136

Title: ED
Name: BROWN, TINA
Address: 450 NW 14TH STREET
City-St-Zip: MIAMI, FL 33136

Title: D
Name: DOTSON, ALBERT E JR.
Address: 1450 BRICKELL AVENUE, 23RD FLOOR
City-St-Zip: MIAMI, FL 33131

Title: D
Name: SILVA, JODI
Address: 836 1ST STREET
City-St-Zip: MIAMI BEACH, FL 33139

Title: D
Name: MAYNE, NATASHA D
Address: 4301 SOUTH FLAMINGO ROAD SUITE 106-121
City-St-Zip: FT. LAUDERDALE, FL 33330

Title: DT
Name: MARINO, STEPHEN A
Address: 100 SE 2ND STREET - 30TH FLOOR
City-St-Zip: MIAMI, FL 33131

I hereby 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 all other like empowered.

SIGNATURE: TINA BROWN

ED

04/13/2012

Electronic Signature of Signing Officer or Director

Date