2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000008016

Entity Name: YOUTH DEVELOPMENT INITIATIVES, INC.

FILED Mar 24, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1932 DREW STREET SUITE 8 CLEARWATER, FL 33765 **New Mailing Address: Current Mailing Address:** 1938 DREW ST., STE #8 1932 DREW STREET CLEARWATER, FL 33765 SUITE 8 CLEARWATER, FL 33765 FEI Number: 59-3712280 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BALDWIN, KARALIA W 2076 WIDGEON AVE SAFETY HARBOR, FL 34695 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete CAMPBELL, GLORIA Name: Name: 1077 WEATHERFIELD DR Address: Address: City-St-Zip: DUNEDIN, FL 34698 City-St-Zip: Title: AED () Delete Title: (X) Change () Addition AED PIERCE, JAMES Name: MCKAHAND, EDWARD Name: Address: 2906 TORREY PINES COURT Address: 1465 FAIRMONT ST. City-St-Zip: CLEARWATER, FL 33761 City-St-Zip: CLEARWATER, FL 33755 Title: PD () Delete Title: () Change () Addition BALDWIN, KARALIA Name: Name: Address: 2076 WIDGEON AVE Address: City-St-Zip: SAFETY HARBOR, FL 34695 City-St-Zip: () Delete Title: PD Title: () Change () Addition LIGHTFOOT, RANDOLPH Name: Name: 2211 REPUBLIC DR Address: Address: City-St-Zip: DUNEDIN, FL 34698 City-St-Zip: Title: () Delete Title: (X) Change () Addition BEAL, ANGELA D BALDWIN, KARALIA W Name: Name: 1731 TAYLOR LAKE PL 2076 WIDGEON AVE Address: Address: City-St-Zip: LARGO, FL 33778 City-St-Zip: SAFETY HARBOR, FL 34695 Title: () Delete Title: (X) Change () Addition CAMPBELL, CORLIS BRYANT, LENEICE Name: Name: Address: 11172 120TH TERRACE N. Address: 4875 AUGUSTA AVE LARGO, FL 33778 OLDSMAR, FL 34677 City-St-Zip: 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: KARALIA W. BALDWIN PD 03/24/2008