2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000001547

Apr 30, 2004 Secretary of State

Entity Name: STANLEY L. JOHNSON YOUNG FATHERS YOUNG MEN ORGANIZATION INC.

Current Principal Place of Business: New Principal Place of Business:

2771-29 MONUMENT RD., #195 JACKSONVILLE, FL 32225

Current Mailing Address: New Mailing Address:

2771-29 MONUMENT RD., #195 JACKSONVILLE, FL 32225

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

JOHNSON, STANLEY 2771-29 MÓNUMENT RD., #195 JACKSONVILLE, FL 32225

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:

PCEO () Delete (X) Change () Addition JOHNSON, STANLEY PAIGE, RODNEY Name: Name:

1592 COOL RAIN CT. Address: 2121 TILDEN ST. Address: JACKSONVILLE, FL 32225

City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32206

Title: () Delete Title: S/D (X) Change () Addition JOHNSON, STANLEY Name: JOHNSON, STANLEY Name:

Address: 1592 COOL RAIN CT. Address: 1592 COOL RAIN CT. City-St-Zip: JACKSONVILLE, FL 32225 City-St-Zip: JACKSONVILLE, FL 32225

Title: VSD () Delete Title: (X) Change () Addition PAIGE, RODNEY ROBINSON-ANTOINE, GAIL Name: Name:

Address: 4618 FOREST GROVE CT. Address: 135 WATHROP ST.

City-St-Zip: JACKSONVILLE, FL 32224 City-St-Zip: JACKSONVILLE, FL 32206

Title: SD () Delete Title: V/D (X) Change () Addition Name: JOHNSON, WILLIE Name: JOHNSON, WILLIE

360 MARTIN LUTHER KING JR. DR. 360 MARTIN LUTHER KING JR. DR. Address: Address:

City-St-Zip: BALDWIN, FL 32234 City-St-Zip: BALDWIN, FL 32234

Title: () Delete Title: (X) Change () Addition

ANDREWS, DELPHIA ANDREWS, DELPHIA Name: Name: 6839 PROVOST ROAD 6839 PROVOST ROAD Address: Address: City-St-Zip: JACKSONVILLE, FL 32216 City-St-Zip: JACKSONVILLE, FL 32216

Title: () Delete Title: (X) Change () Addition

MARSHALL, MELVIN MARSHALL, MELVIN Name: Name: Address: 829 TAMARY COVE LANE Address: 829 TAMARY COVE LANE JACKSONVILLE, FL 32218 JACKSONVILLE, FL 32218 City-St-Zip: 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STANLEY L. JOHNSON S/D 04/30/2004