2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 19, 2006
Secretary of State

DOCUMENT# N01000008567

Entity Name: ORLANDO YOUNG PROFESSIONALS LEADERSHIP GROUP, INC.

Current Principal Place of Business:

PO BOX 1629
ORLANDO, FL 32829

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1629
ORLANDO, FL 32802 US

New Mailing Address:

FEI Number: 75-3001659 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

TAYCO ENTERPRISES, INC.
8406 PCB PRKWY
SUITE L
PANAMA CITY BEACH, FL 32407 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: BUHLER, FAITH
Address: PO BOX 941742
City-St-Zip: MAITLAND, FL 32794

Title: S ( ) Delete
Name: MILLER, VICTORIA
Address: PO BOX 941742
City-St-Zip: MAITLAND, FL 32794

Title: TD ( ) Delete
Name: ALLUM, DONNA
Address: PO BOX 941742
City-St-Zip: MAITLAND, FL 32794

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: LATORRE, JUSTIN
Address: PO BOX 941742
City-St-Zip: MAITLAND, FL 32794

Title: S (X) Change ( ) Addition
Name: KERENSKY, VICTORIA
Address: PO BOX 941742
City-St-Zip: MAITLAND, FL 32794

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

I hereby certify that the information supplied with this filing does not qualify for the 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: DONNA ALLUM TD 05/19/2006

Electronic Signature of Signing Officer or Director — Date