2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 23, 2011
Secretary of State

DOCUMENT# N01000008714

Entity Name: RECOVERY AND EMPOWERMENT FOR FAMILY AND YOUTH SERVICES CENTER, INC.

Current Principal Place of Business:

3421 TUSCANY WAY
BOYNTON BEACH, FL 33435

New Principal Place of Business:

Current Mailing Address:

3421 TUSCANY WAY
BOYNTON BEACH, FL 33435

New Mailing Address:

FEI Number: 30-0093284 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SAINT-VIL, ESPERANTA
3421 TUSCANY WAY
BOYNTON BEACH, FL 33435 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: DOP
Name: SAINT-VIL, ESPERANTA
Address: 3421 TUSCANY WAY
City-St-Zip: BOYNTON BEACH, FL 33435

Title: DS
Name: VIEUX, IMMACULA
Address: 3421 TUSCANY WAY
City-St-Zip: BOYNTON BEACH, FL 33435

Title: DT
Name: GARCIA, MARIANNE C
Address: 3421 TUSCANY WAY
City-St-Zip: BOYNTON BEACH, FL 33435

Title: DVP
Name: SAINT VIL, PAULINE
Address: 3421 TUSCANY WAY
City-St-Zip: BOYNTON BEACH, FL 33435

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: ESPERANTA SAINTVIL DOP 02/23/2011

Electronic Signature of Signing Officer or Director Date