

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001022

FILED
Apr 30, 2004
Secretary of State**Entity Name:** YOUTH ENVISIONING SUCCESS (Y.E.S.) ACADEMY INC.**Current Principal Place of Business:**925 NW 110TH TERRACE
PLANTATION, FL 33324**New Principal Place of Business:****Current Mailing Address:**925 NW 110TH TERRACE
PLANTATION, FL 33324**New Mailing Address:****FEI Number:****FEI Number Applied For (X)****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**WALKER, DWIGHT SR
925 NW 110TH TERRACE
PLANTATION, FL 33324**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: D () Delete
Name: WALKER, DWIGHT L SR
Address: 925 NW 110TH TERRACE
City-St-Zip: PLANTATION, FL 33324Title: D () Delete
Name: ROMMEY, PATIENCE
Address: 925 NW 110TH TERRACE
City-St-Zip: PLANTATION, FL 33324Title: D () Delete
Name: WALKER, DENNIS
Address: 259 NW 29TH TERRACE
City-St-Zip: FT. LAUDERDALE, FL 33311Title: D () Delete
Name: INGRAM, DENISE
Address: 3780 NW 9TH COURT
City-St-Zip: FT. LAUDERDALE, FL 33311**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip: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 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: DWIGHT WALKER

D

04/30/2004

Electronic Signature of Signing Officer or Director

Date