2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 14, 2004
Secretary of State

DOCUMENT# N03000003076

Entity Name: CENTRAL FLORIDA YES, INC.

Current Principal Place of Business:

905 S MASSACHUSETTS AVE
DELAND, FL 32724

New Principal Place of Business:

5542 METRO WEST BLVD.
307
ORLANDO, FL 32811

Current Mailing Address:

905 S MASSACHUSETTS AVE
DELAND, FL 32724

New Mailing Address:

5542 METRO WEST BLVD.
307
ORLANDO, FL 32811

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

Name and Address of Current Registered Agent:

CURTIS-WEAKLEY, LISSA
905 S MASSACHUSETTS AVE
DELAND, FL 32724 US

Name and Address of New Registered Agent:

CURTIS-WEAKLEY, LISSA
5542 METRO WEST BLVD
307
ORLANDO, FL 32811 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: 05/14/2004
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: CLUNEY, TERRI
Address: 301 KING GEORGE DRIVE
City-St-Zip: DAVENPORT, FL 33837

Title: DV (X) Delete
Name: HOEL, STEPHEN
Address: 9145 FLORIBUNDA DRIVE
City-St-Zip: ORLANDO, FL 32818

Title: DS ( ) Delete
Name: LAPLACE, PAULA
Address: 1301 WILDBERRY LANE
City-St-Zip: DELTONA, FL 32725

Title: DT ( ) Delete
Name: JAROSZ, PATRICIA L
Address: 3860 RUNNING WATER DRIVE
City-St-Zip: ORLANDO, FL 32829

Title: D (X) Delete
Name: HENNINGSEN, TODD
Address: 335 CLAY ST
City-St-Zip: WINTER PARK, FL 32789

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: BRAID, LAURIE
Address: 12035 SUMMERSPRING LAKES DR.
City-St-Zip: ORLANDO, FL 32811

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

Title: DS (X) Change ( ) Addition
Name: CURTIS-WEAKLEY, LISSA
Address: 5542 METRO WEST BLVD. #307
City-St-Zip: ORLANDO, FL 32811

Title: DT (X) Change ( ) Addition
Name: CURTIS-WEAKLEY, KAREN REV.
Address: 5542 METRO WEST BLVD. #307
City-St-Zip: ORLANDO, FL 32811

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: KAREN CURTIS-WEAKLEY DT 05/14/2004
Electronic Signature of Signing Officer or Director — Date