2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005941

FILED Apr 28, 2009 Secretary of State

Entity Name: YOUTH EMPOWERED TO ACHIEVE! INC.

Current Principal Place of Business: New Principal Place of Business: 13704 N. 20TH STREET 2225 EAST 109TH AVE TAMPA, FL 33613 TAMPA, FL 33612 **Current Mailing Address: New Mailing Address:** P.O.BOX 291339 TAMPA, FL 33687 FEI Number: 32-0079842 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: STERNS, RANDY 10020 HÁMPTON PLACE TAMPA, FL 33618 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: () Change () Addition () Delete HARRIS, MITCHELL Name: Name: 10529 CORY LAKE DRIVE Address: Address: City-St-Zip: TAMPA, FL 33647 City-St-Zip: Title: () Delete Title: () Change () Addition Name: STERNS, RANDY Name: Address: 10020 HAMPTON PLACE Address: City-St-Zip: TAMPA, FL 33618 City-St-Zip: Title: () Delete Title: () Change () Addition LA COLLA, ANTHONY Name: Name: 2002 E. 5TH AVENUE #209 Address: Address: City-St-Zip: TAMPA, FL 33605 City-St-Zip: Title: () Delete Title: () Change () Addition Name: FOUNTAIN, MICHAEL Name: 12212 TWIN BRANCH ACRES RD Address: Address: City-St-Zip: TAMPA, FL 33626 City-St-Zip: Title: () Delete Title: () Change () Addition DAVIS, LUCIOUS Name: Name: 4206 IMPERIAL EAGLE DR. Address: Address: City-St-Zip: TAMPA, FL 33594 City-St-Zip: Title: () Delete Title: (X) Change () Addition STRAND, MARSHA-ANN STRAND, MARSHA-ANN Name: Name: Address: 13367 ARBOR POINTE CIRCLE, #102 Address: 4213 BRANCHSIDE LANE TAMPA, FL 33617 WESLEY CHAPEL, FL 33543 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: RANDY STERNS VP 04/28/2009