

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 28, 2008 8:00 am
Secretary of State

01-28-2008 90051 013 ****61.25

DOCUMENT # N03000008133 1. Entity Name THE YAH-YAH GIRLS, INC.					
Principal Place of Business 109 TOCOPILLA ST PUNTA GORDA, FL 33983				Mailing Address 109 TOCOPILLA ST PUNTA GORDA, FL 33983	
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State Zip		City & State Zip		4. FEI Number 37-1475987 Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				01052008 Chg-NP CR2E037 (12/06)	
6. Name and Address of Current Registered Agent KEARNS, JANICE 109 TOCOPILLA ST PUNTA GORDA, FL 33983			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reissuing) _____ DATE _____ Signature, typed or printed name of registered agent and title if applicable.					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP DAVIS, JOANNA 3406 ST E. CROIX CT PUNTA GORDA, FL 33950	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP MURIEL De STEFANO 1133 BAL HARBOR BLVD. #1139 PUNTA GORDA FL 33950	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P MOWRY, JOLENE 5241 ALMAR DR PUNTA GORDA, FL 33950	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	P JANICE KEARNS 109 TOCOPILLA ST PUNTA GORDA FL 33983	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T KEARNS, JANICE 109 TOCOPILLA ST PUNTA GORDA, FL 33983	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	T JO ANNE DAVIS 3406 ST. CROIX CT. PUNTA GORDA FL 33950	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S NICOLASI, JOSE PHONE 1780 DEBORAH DR., 25 PUNTA GORDA, FL 33950	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	S SANDY BUSHER 40 TROPICANA DR. PUNTA GORDA FL 33950	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	☐ Change ☐ Addition	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	☐ Change ☐ Addition	☐ Change ☐ Addition		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>JANICE KEARNS</u> JANICE KEARNS SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			1-24-08 941-235-0151 Date Daytime Phone #		