

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000004483

FILED
May 02, 2006
Secretary of State

Entity Name: SERVICE YOUTH DEVELOPMENT & LEARNING ORGANIZATION CORPORATION

Current Principal Place of Business:

3571 N.W. 21ST STREET
COCONUT CREEK, FL 33066

New Principal Place of Business:

Current Mailing Address:

3571 N.W. 21ST STREET
COCONUT CREEK, FL 33066

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

SWEETIE SERVICE, ANN-MARIE
3571 NW 21ST STREET
COCONUT CREEK, FL 33066 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PCEO () Delete
Name: SWEETIE SERVICE, ANN-MARIE
Address: 3571 NW 21ST STREET
City-St-Zip: COCONUT CREEK, FL 33066

Title: VP () Delete
Name: SERVICE, NORMA
Address: 3571 NW 21ST STREET
City-St-Zip: COCONUT CREEK, FL 33066

Title: S () Delete
Name: MOYER, SHADRETTA
Address: 1030 SW 7TH AVE
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: D () Delete
Name: CRAIG, MARSHA
Address: 3571 N.W. 21ST STREET
City-St-Zip: COCONUT CREEK, FL 33066

Title: CFO () Delete
Name: CHAMBERS, MICHELLINE
Address: 10968 NW 21ST STREET
City-St-Zip: CORAL SPRINGS, FL 33071

Title: D () Delete
Name: MARAND, PAEEZ
Address: 3571 NW 21 ST STREET
City-St-Zip: COCONUT CREEK, FL 33066

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:

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 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: ANNMARIE SWEETIE SERVICE

PCEO

05/02/2006

Electronic Signature of Signing Officer or Director

Date