

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000766

FILED  
Feb 19, 2009  
Secretary of State

**Entity Name:** YOUTH AGAINST SUBSTANCE ABUSE, INC.

**Current Principal Place of Business:**

5004 BRIAR OAKS CIRCLE  
ORLANDO, FL 32808

**New Principal Place of Business:**

**Current Mailing Address:**

5004 BRIAR OAKS CIRCLE  
ORLANDO, FL 32808

**New Mailing Address:**

**FEI Number:** 38-3692698

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MANGHAM, VONZELLA  
5004 BRIAR OAKS CIRCLE  
ORLANDO, FL 32808 US

**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: VP D ( ) Delete  
Name: RIGGINS, DANIALLE K.  
Address: 604 BAHIA CIRCLE  
City-St-Zip: OCALA, FL 34472

Title: S ( ) Delete  
Name: LEACH, NOTURAL T.  
Address: 5004 BRIAR OAKS CIRCLE  
City-St-Zip: ORLANDO, FL 32808

Title: D ( ) Delete  
Name: DRAKE, TABITHA  
Address: 1335 KNOLLWOOD DR  
City-St-Zip: ORLANDO, FL 33827 US

Title: D P ( ) Delete  
Name: MANGHAM, VONZELLA  
Address: 5004 BRIAR OAKS CIRCLE  
City-St-Zip: ORLANDO, FL 32808 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: RIGGINS, DANIALLE K.  
Address: 1084 SE 57TH AVE  
City-St-Zip: OCALA, FL 34471

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

Title: D (X) Change ( ) Addition  
Name: CARTER, NICOLE  
Address: 656 N W 20TH COURT  
City-St-Zip: POMPANO BEACH, FL 33060 US

Title: P (X) Change ( ) Addition  
Name: MANGHAM, VONZELLA  
Address: 5004 BRIAR OAKS CIRCLE  
City-St-Zip: ORLANDO, FL 32808 US

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: VONZELLA MANGHAM

P

02/19/2009

Electronic Signature of Signing Officer or Director

Date