

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002908

FILED
Apr 26, 2007
Secretary of State

Entity Name: NATIONAL YOUTH ASSOCIATION FOR ACADEMIC & ATHLETICS, INC

Current Principal Place of Business:

1301 12TH AVE SOUTH
LAKE WORTH, FL 33460

New Principal Place of Business:

Current Mailing Address:

1301 12TH AVE SOUTH
LAKE WORTH, FL 33460

New Mailing Address:

1728 18TH AVE NORTH
LAKE WORTH, FL 33461

FEI Number: 48-1276558

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOWE, AUNDRA D
1301 12TH AVE S
LAKE WORTH, FL 33460 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: P () Delete
Name: LOWE, AUNDRA D
Address: 1301 12TH AVE SOUTH
City-St-Zip: LAKE WORTH, FL 33460

Title: V () Delete
Name: ATWATERS, RODNEY
Address: 2001 NW SEACREST BLVD.
City-St-Zip: BOYNTON BEACH, FL 33435

Title: D () Delete
Name: BROWN, MAUREEN
Address: 3348 MOCKBRIDGE LANE
City-St-Zip: LANTANA, FL 33460

Title: D () Delete
Name: LOWE, STEPHAINÉ
Address: 1301 12TH AVE
City-St-Zip: LAKE WORTH, FL 33460

Title: D () Delete
Name: WILSON, DARREL
Address: 9 CROSSING CIR
City-St-Zip: BOYNTON BEACH, FL 33435

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: D (X) Change () Addition
Name: LOWE, STEPHAINÉ
Address: 1728 18TH AVE NORTH
City-St-Zip: LAKE WORTH, FL 33460

Title: () Change () Addition
Name:
Address:
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: AUNDRA D LOWE

P

04/26/2007

Electronic Signature of Signing Officer or Director

Date