

**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
May 09, 2007  
Secretary of State**

DOCUMENT# N05000010329

Entity Name: TASK FORCE FOR GUYANA'S YOUTH INC.

**Current Principal Place of Business:**

2490SW 85TH AVE  
MIRAMAR, FL 33025

**New Principal Place of Business:**

**Current Mailing Address:**

2490SW 85TH AVE  
MIRAMAR, FL 33025

**New Mailing Address:**

FEI Number: 81-0679535      FEI Number Applied For ( )      FEI Number Not Applicable ( )      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:**

SIMON, ROBIN  
2490SW 85TH AVE  
MIRAMAR, FL 33025      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: CEOT      ( ) Delete  
Name: LONDON, DONNA  
Address: 15221 S.W.20TH STREET  
City-St-Zip: MIRAMAR, FL 33027

Title: CD      ( ) Delete  
Name: CUMMINGS, DENNIS  
Address: 2490SW 85TH AVE  
City-St-Zip: MIRAMAR, FL 33025

Title: S      ( ) Delete  
Name: SIMON, ROBIN  
Address: 2490SW 85TH AVE  
City-St-Zip: MIRAMAR, FL 33025

Title: AS      ( ) Delete  
Name: GEORGE, CHERYL  
Address: 2490SW 85TH AVE  
City-St-Zip: MIRAMAR, FL 33025

Title: D      ( ) Delete  
Name: CREVALLE, SIMONE  
Address: 2490SW 85TH AVE  
City-St-Zip: MIRAMAR, FL 33025

Title: D      ( ) Delete  
Name: SIMON, PAT  
Address: 2490SW 85TH AVE  
City-St-Zip: MIRAMAR, FL 33025

**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 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: DONNA LONDON

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

CEOT

05/09/2007

\_\_\_\_\_  
Date