

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000004673

FILED
Jun 17, 2009
Secretary of State

Entity Name: INTERNATIONAL YOUTH EMPOWERMENT RETREAT, INC.

Current Principal Place of Business:

2400 WARE DR.
WEST PALM BEACH, FL 33409

New Principal Place of Business:

Current Mailing Address:

7794 KISMET ST.
MIRAMAR, FL 33023

New Mailing Address:

2400 WARE DRIVE
WEST PALM BEACH, FL 33409

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:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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: DP () Delete
Name: SCULLEY, OTHNIEL C.
Address: 2400 WARE DR.
City-St-Zip: WEST PALM BEACH, FL 33409

Title: DT () Delete
Name: PEART, CHARMANE
Address: 2400 WARE DR.
City-St-Zip: WEST PALM BEACH, FL 33409

Title: DS () Delete
Name: JAMES, NICOLA
Address: 2400 WARE DR.
City-St-Zip: WEST PALM BEACH, FL 33409

Title: V () Delete
Name: GAYLE, NOVELETTE
Address: 2400 WARE DR.
City-St-Zip: WEST PALM BEACH, FL 33409

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:

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: NICOLA JAMES

DS

06/17/2009

Electronic Signature of Signing Officer or Director

Date