2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000005444

FILED Jan 19, 2009 Secretary of State

Entity Name: DUKE OF EDINBURGH'S AWARD YOUNG AMERICANS' CHALLENGE, INC.

Current Principal Place of Business: New Principal Place of Business: 700 NORTH OLIVE AVENUE, #2 WEST PALM BEACH, FL 33401 **Current Mailing Address: New Mailing Address:** 700 NORTH OLIVE AVENUE, #2 WEST PALM BEACH, FL 33401 FEI Number: 20-4909474 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SCHULTZ, AMY E 700 NORTH OLIVE AVENUE, #2 WEST PALM BEACH, FL 33401 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition HAGKELL, SAMUEL III Name: Name: 4559 PETIT AVE. Address: Address: City-St-Zip: ENCINO, CA 91436 City-St-Zip: Title: () Delete Title: () Change () Addition Name: THALER, MANLEY H Name: Address: 700 NORTH OLIVE AVENUE, #2 Address: City-St-Zip: WEST PALM BEACH, FL 33401 City-St-Zip: Title: () Delete Title: (X) Change () Addition GRIFFIN, LANNY Name: GRIFFITH, LANNY Name: 1275 PENNSYLVANIA AVE. NW 1275 PENNSYLVANIA AVE. NW Address: Address: City-St-Zip: WASHINGTON, DC 20004 City-St-Zip: WASHINGTON, DC 20004 () Delete Title: Title: () Change () Addition Name: DANIELSON, JOHN Name: EMPIRE STE BLDG STE 7506 Address: Address: City-St-Zip: NEW YORK, NY 10118 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: SAMUEL HASKELL III PRES 01/19/2009