

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006231

FILED  
May 05, 2009  
Secretary of State

Entity Name: YANA! (YOU ARE NOT ALONE!), INC.

## Current Principal Place of Business:

660 BLUEBILL COURT  
KISSIMMEE, FL 347594521

## New Principal Place of Business:

660 BLUEBILL COURT  
KISSIMMEE, FL 34759

## Current Mailing Address:

660 BLUEBILL COURT  
KISSIMMEE, FL 347594521

## New Mailing Address:

660 BLUEBILL COURT  
KISSIMMEE, FL 34759

FEI Number: 66-0545971      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
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:

RODRIGUEZ, CARMEN D REV.  
660 BLUEBILL COURT  
KISSIMMEE, FL 347594521 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: RODRIGUEZ, CARMEN D REV.  
Address: 660 BLUEBILL COURT  
City-St-Zip: KISSIMMEE, FL 347594521

Title: ED ( ) Delete  
Name: GONZALEZ, ILIA M  
Address: 709 PUTT LANE  
City-St-Zip: KISSIMMEE, FL 34759

Title: D ( ) Delete  
Name: RODRIGUEZ, TIARA  
Address: 660 BLUEBILL COURT  
City-St-Zip: KISSIMMEE, FL 347594521

Title: D ( ) Delete  
Name: RODRIGUEZ, LEONARDO DR.  
Address: 660 BLUEBILL COURT  
City-St-Zip: KISSIMMEE, FL 347594521

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition  
Name: GONZALEZ, AVELIRA  
Address: 709 PUTT LANE  
City-St-Zip: KISSIMMEE, FL 34759

Title: D (X) Change ( ) Addition  
Name: RODRIGUEZ, TIARA  
Address: 660 BLUEBILL COURT  
City-St-Zip: KISSIMMEE, FL 34759

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

Title: D ( ) Change (X) Addition  
Name: SUAREZ, ISRAEL  
Address: 3357 CYPRESS POINT CIRCLE  
City-St-Zip: SAINT CLOUD, FL 347772

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: REVEREND CARMEN D. RODRIGUEZ

P

05/05/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date