## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000011117

FILED May 20, 2007 Secretary of State

Entity Name: NEW HORIZON 4 YOUTH & FAMILIES, INC.

**Current Principal Place of Business: New Principal Place of Business:** 9316 CAROLVIEW WAY ORLANDO, FL 32836 **Current Mailing Address: New Mailing Address:** 9316 CAROLVIEW WAY ORLANDO, FL 32836 FEI Number: 51-0610169 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 New Registered Agent: Name and Address of Current Registered Agent: CLAUDE, EDME JEAN JOSEPH, BAPTHOL 9316 CAROLVIEW WAY 1000 E ATLANTIC BLVD ORLANDO, FL 32836 SUITE 201E POMPANO BEACH, FL 33060 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: BAPTHOL JOSEPH 05/20/2007 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: CHRM () Delete () Change () Addition CAYO, JONAS Name: Name: 9100 PHILLIPS GROVE TERRAE Address: Address: City-St-Zip: ORLANDO, FL 32836 City-St-Zip: Title: VCHR () Delete Title: () Change () Addition CLERVIL, LAFONTANT Name: Name: Address: 801 GRAND CAIMAN CT. Address: City-St-Zip: ORLANDO, FL 32835 City-St-Zip: Title: () Delete Title: () Change () Addition WILLIAM, PAULA Name: Name: 4000 SANTA BARBARA RD Address: Address: City-St-Zip: KISSIMMEE, FL 34736 City-St-Zip: Title: TD ( ) Delete Title: () Change () Addition Name: KENOL, CLAUDE Name: 3012 DAMOUTH DRIVE Address: Address: City-St-Zip: ORLANDO, FL 32818 City-St-Zip: Title: (X) Delete Title: () Change () Addition JEAN, PAULETTE CAYO Name: Name: 9316 CAROLVIEW WAY Address: Address: City-St-Zip: ORLANDO, FL 32836 City-St-Zip: Title: (X) Delete Title: () Change () Addition BEN BANI, KOFI ATTA Name: Name: Address: 336 SPRINGFIELD ST. Address: SPRINGFIELD, MA 01107 City-St-Zip: 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: JONAS CAYO CHR 05/20/2007