

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000011117

FILED  
Jan 30, 2009  
Secretary of State

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

**Current Principal Place of Business:**

13744 EDEN ISLE BLVD  
WINDERMERE, FL 34786

**New Principal Place of Business:**

**Current Mailing Address:**

13744 EDEN ISLE BLVD  
WINDERMERE, FL 34786

**New Mailing Address:**

**FEI Number:** 51-0610169

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

JOSEPH, BAPTHOL  
1000 E ATLANTIC BLVD  
SUITE 201E  
POMPANO BEACH, FL 33060 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: CHRM ( ) Delete  
Name: CAYO, JONAS  
Address: 9126 LEE LAND ARCHER BLVD  
City-St-Zip: ORLANDO, FL 32836

Title: VCHR ( ) Delete  
Name: CLERVIL, LAFONTANT  
Address: 801 GRAND CAIMAN CT.  
City-St-Zip: ORLANDO, FL 32835

Title: SD ( ) Delete  
Name: WILLIAM, PAULA  
Address: 4000 SANTA BARBARA RD  
City-St-Zip: KISSIMMEE, FL 34736

Title: TD ( ) Delete  
Name: KENOL, CLAUDE  
Address: 13744 EDEN ISLE BLVD  
City-St-Zip: WINDERMERE, FL 34786

**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: CAYO JONAS

CHRM

01/30/2009

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

\_\_\_\_\_  
Date