

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000002499

FILED
Feb 12, 2010
Secretary of State

Entity Name: YOUTH DEVELOPMENT INSTITUTE, INC.

Current Principal Place of Business:

21113 JOHNSON STREET #120
PEMBROKE PINES, FL 33029

New Principal Place of Business:

4601 NW 167TH STREET
MIAMI GARDENS, FL 33056

Current Mailing Address:

21113 JOHNSON STREET #120
PEMBROKE PINES, FL 33029

New Mailing Address:

15841 PINES BOULEVARD
SUITE 142
PEMBROKE PINES, FL 33027

FEI Number: 26-2172346

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOMAX, WAYNE
21113 JOHNSON STREET #120
PEMBROKE PINES, FL 33029 US

Name and Address of New Registered Agent:

LOMAX, WAYNE
4601 NW 167TH STREET
MIAMI GARDENS, FL 33056 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:

02/12/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CHRM
Name: BARRETT, PATRICK
Address: 4601 NW 167TH STREET
City-St-Zip: MIAMI GARDENS, FL 33056

Title: TRES
Name: LYNCH, ANTOINETTE DR.
Address: 4601 NW 167TH STREET
City-St-Zip: MIAMI GARDENS, FL 33056

Title: PRES
Name: LOMAX, WAYNE
Address: 4601 NW 167TH STREET
City-St-Zip: MIAMI GARDENS, FL 33056

Title: SECR
Name: DAVIS, LISA
Address: 4601 NW 167TH STREET
City-St-Zip: MIAMI GARDENS, FL 33056

I hereby 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 all other like empowered.

SIGNATURE: ANTOINETTE LYNCH

TRES

02/12/2010

Electronic Signature of Signing Officer or Director

Date