2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000004808

FILED Apr 15, 2009 Secretary of State

Entity Name: CENTRAL FLORIDA YOUTH ORGANIZATION, INC

Current Principal Place of Business: New Principal Place of Business:

7356 HABBERSHAM DR 7736 REX HILL TRL ORLANDO, FL 32808 ORLANDO, FL 32818

Current Mailing Address: New Mailing Address:

7356 HABBERSHAM DR 7736 REX HILL TRL ORLANDO, FL 32808 7736 REX HILL TRL ORLANDO, FL 32818

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

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

JOSEPH, RIBAINE
7356 HABBERSHAM DR
ORLANDO, FL 32808 US
JOSEPH, RIBAINE
7736 REX HILL TRL
ORLANDO, FL 32818 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: RIBAINE JOSEPH 04/15/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: CEO (X) Change () Addition Name: JOSEPH, RIBAINE Name: JOSEPH, RIBAINE

 Address:
 7356 HABBERSHAM DR
 Address:
 7736 REX HILL TRL

 City-St-Zip:
 ORLANDO, FL 32808
 City-St-Zip:
 ORLANDO, FL 32818

Title: VP () Delete Title: COO (X) Change () Addition Name: WATSON, SHAWN Name: JOACHIM, NATALIE

 Name
 WATSON, SHAWN
 Name
 JOACHIW, NATALIE

 Address:
 4873 BRIDGE RD
 Address:
 8069 DRESSAGE DR

 City-St-Zip:
 COCOA, FL 32927
 City-St-Zip:
 ORLANDO, FL 32818

Title: VP () Delete Title: CFO (X) Change () Addition Name: ALCINORD, OSTER Name: ALCINORD, OSTER

 Name:
 ALCINORD, OSTER
 Name:
 ALCINORD, OSTER

 Address:
 P.O.BOX 683031
 Address:
 P.O.BOX 683031

 City-St-Zip:
 ORLANDO, FL 32818
 City-St-Zip:
 ORLANDO, FL 32818

Title: VP (X) Delete Title: () Change () Addition

 Name:
 BROWN, RICARDO D
 Name:

 Address:
 4447 BEAUMONT DR
 Address:

 City-St-Zip:
 ORLANDO, FL 32808
 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: RIBAINE JOSEPH CEO 04/15/2009