

N 11000004544

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Amend  
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11/28/11

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** Youth Preservation Project, Inc.

**DOCUMENT NUMBER:** N11000004544

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Lauren Josephs

(Name of Contact Person)

Visionary Vanguard Group, Inc.

(Firm/ Company)

976 Lake Baldwin Ln; Ste. 203

(Address)

Orlando, FL 32814

(City/ State and Zip Code)

ljosephs@vvgroup.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lauren Josephs

(Name of Contact Person)

at ( 407 ) 896-2066

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

☐ \$35 Filing Fee

☐ \$43.75 Filing Fee &  
Certificate of Status

☐ \$43.75 Filing Fee &  
Certified Copy  
(Additional copy is  
enclosed)

☒ \$52.50 Filing Fee  
Certificate of Status  
Certified Copy  
(Additional Copy is  
enclosed)

**Mailing Address**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Articles of Amendment  
to  
Articles of Incorporation  
of

Youth Preservation Project, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

NI1000004544

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

*The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or " Inc." "**Company**" or "**Co.**" may not be used in the name.*

**B. Enter new principal office address, if applicable:**

*(Principal office address **MUST BE A STREET ADDRESS**)*

**C. Enter new mailing address, if applicable:**

*(Mailing address **MAY BE A POST OFFICE BOX**)*

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

*Name of New Registered Agent:* \_\_\_\_\_

\_\_\_\_\_  
*(Florida street address)*

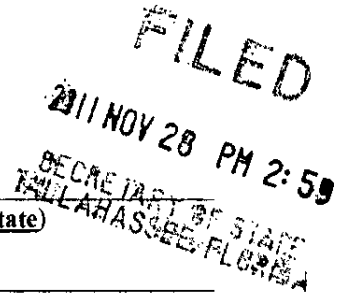
*New Registered Office Address:*

\_\_\_\_\_, Florida \_\_\_\_\_  
*(City) (Zip Code)*

**New Registered Agent's Signature, if changing Registered Agent:**

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

\_\_\_\_\_  
*Signature of New Registered Agent, if changing*



**If AMENDING the Officers and/or Directors, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officer/director.**

*(Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them on an additional sheet.)*

<b><u>Title(s)</u></b>	<b><u>Name</u></b>	<b><u>Address</u></b>
1) <u>Chair</u>	<u>Mr. Julian Robb</u>	<u>296 Morning Glory Drive</u> <u>Lake Mary, FL 32746</u>
2) <u>Treas</u>	<u>Mrs. Shena Randolph</u>	<u>1019 Lake Doe Blvd</u> <u>Apopka, FL 32703</u>
3) <u>Dir</u>	<u>Mr. Neil Richardson</u>	<u>8026 Country Run Pkwy</u> <u>Orlando, FL 32818</u>
4) <u>Co-Ch</u>	<u>Mrs. Diedre Campbell</u>	<u>1114 Kempton Chase Pkwy</u> <u>Orlando, FL 32837</u>
5) <u>Secy</u>	<u>Ms. Cheryl Parry</u>	<u>1631 Long Ridge Ct.</u> <u>Orlando, FL 32807</u>
6) <u>Pres</u>	<u>Dr. Stephan E. Brown</u>	<u>976 Lake Baldwin Ln; Ste. 203</u> <u>Orlando, FL 32814</u>

**If REMOVING an officer and/or director, please list the title(s) and name of the officer/director to be removed:**

<b><u>Title(s)</u></b>	<b><u>Name</u></b>	<b><u>Title(s)</u></b>	<b><u>Name</u></b>
1) <u>PRES</u>	<u>Stephan E. Stephan</u>	4) _____	_____
2) _____	_____	5) _____	_____
3) _____	_____	6) _____	_____

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**Additional Directors**

<b>Title</b>	<b>Name</b>	<b>Address</b>
Director	Mr. Donald Barber	P.O. Box 681148 Orlando, FL 32868

**E. If amending or adding additional Articles, enter change(s) here:**  
*(attach additional sheets, if necessary). (Be specific)*

Article IX: Dissolution Clause

The Youth Preservation Project, Inc. (YPP) may be dissolved only with authorization by its Board of Directors given at a special meeting called for that purpose and with subsequent approval by a two-thirds (2/3) vote of the voting members. Upon dissolution or other termination of the YPP, all remaining assets of the YPP, after payment in full of all its debts, obligations, and necessary final expenses, or after the making of adequate provision therefore, shall be distributed to such tax-exempt organizations (with purposes similar to those of YPP) as shall be chosen by the then existing Board of Directors of the YPP.

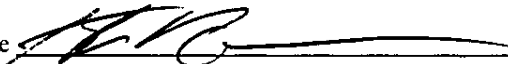
The date of each amendment(s) adoption: 11.21.11

Effective date if applicable: \_\_\_\_\_  
(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

- ☒ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
- ☐ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated November 21, 2011

Signature   
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Stephan E. Brown, PhD  
(Typed or printed name of person signing)

Incorporator  
(Title of person signing)