2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N29150

Entity Name: L.L.Y.A., INC.

FILED Jul 01, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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6527 MERRILL RD.

US JACKSONVILLE, FL 32277

Current Mailing Address: New Mailing Address:

P O BOX 15096

JACKSONVILLE, FL 32239

FEI Number: 59-2941733 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

WASHINGTON, TAWANDA S

14352 FISH EAGLE DRIVE EAST 7123 OAKNEY RD

JACKSONVILLE, FL 32226 JACKSONVILLE, FL 32211 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.

HARRIS, KEN

SIGNATURE: KEN HARRIS 07/01/2008

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete WASHINGTON, TAWANDA THORNTON, CHRIS Name: Name:

14352 FISH EAGLE DR. E. Address: 10850 JAVA DR Address: City-St-Zip: JACKSONVILLE, FL 32226 City-St-Zip: JACKSONVILLE, FL 32246

Title: () Delete Title: (X) Change () Addition Name: JONES, SHEPRAL Name: HARRIS, KEN

Address: 8401 LOSTARA AVE Address: 7123 OAKNEY RD City-St-Zip: JACKSONVILLE, FL 32211 City-St-Zip: JACKSONVILLE, FL 32211

Title: () Delete Title: (X) Change () Addition MOONM, HEATHER Name: LANNING, ADDIE Name:

5029 CAPE ROMAIN CT 2047 RYAR RD Address: Address: City-St-Zip: JACKSONVILLE, FL 32216

JACKSONVILLE, FL 32277 City-St-Zip:

Title: () Delete Title: D (X) Change () Addition Name:

FISHER, SCOTT Name: FORD, BRANDI 6572 BLACKWOOD DR. Address: Address: 7837 ALHURST ST City-St-Zip: JACKSONVILLE, FL 32277 City-St-Zip: JACKSONVILLE, FL 32277

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

MOON, HEATHER Name: Name: 5029 CAPE ROMAIN CT Address: Address: City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32277

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

FISHER, SCOTT Name: Name: Address: Address: 6572 BLACKWOOD DR JACKSONVILLE, FL 32277 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: KEN HARRIS **VP** 07/01/2008