

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003130

FILED  
Apr 25, 2007  
Secretary of State

**Entity Name:** THE CENTER FOR YOUTH ACTIVITIES, INC.

**Current Principal Place of Business:**

9400 W PALMETTO PARK RD  
BOCA RATON, FL 33428 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 970873  
BOCA RATON, FL 33497 US

**New Mailing Address:**

**FEI Number:** 65-0416165

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

VAHAB, ELLEN JOY  
11669 TIMBERS WAY  
BOCA RATON, FL 33428 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: SD ( ) Delete  
Name: MANDISH, YVONNE  
Address: 22568 VISTA WOOD WAY  
City-St-Zip: BOCA RATON, FL 33428

Title: TD ( ) Delete  
Name: SCHIELKE, HUGO  
Address: 22568 VISTA WOOD WAY  
City-St-Zip: BOCA RATON, FL 33428

Title: VD ( ) Delete  
Name: BLOOM, PHIL  
Address: 1259 SW 9TH ST  
City-St-Zip: BOCA RATON, FL 33486

Title: VD ( ) Delete  
Name: GRIMES, IVAN  
Address: 21446 SUMMER TRACE CIRCLE  
City-St-Zip: BOCA RATON, FL 33428

Title: PD ( ) Delete  
Name: VAHAB, ELLEN JOY  
Address: 11669 TIMBERS WAY  
City-St-Zip: BOCA RATON, FL 33428

**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:

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: ELLEN VAHAB

PRES

04/25/2007

Electronic Signature of Signing Officer or Director

Date