## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N96000002254

FILED Apr 29, 2008 Secretary of State

Entity Name: THE YOUTH LEADERSHIP DEVELOPMENT PROJECT, INC.

Current P	rincipal Place	e of Bu	siness:		New P	rincipal Place	of Business:		
25 SEABR SUITE 300	EEZE AVENL	JE							
	SEACH, FL 33	3483	US						
Current M	ailing Addre	ss:			New M	lailing Addres	ss:		
25 SEABR	EEZE AVENL	JE							
SUITE 300			US						
	65-0660820		lumber Applied	l For ( )	FEI Number Not	Applicable ( )	Certificate	of Status Desire	d (X)
									- (,
Name and	Address of 6	Curren	Registered	Agent:	Name	and Address	of New Regist	tered Agent:	
	CHARLES C EEZE AVENU	IF							
SUITE 300	1		5						
	BEACH, FL 33								
	named entity e of Florida.	submit	s this stateme	ent for the p	ourpose of changi	ing its registere	ed office or regi	istered agent,	or both,
SIGNATUF									
SIGNATUF		nic Sigr	ature of Reg	istered Age	ent		Da	nte	
SIGNATUF		Ū	ŭ	istered Age		IONS/CHANG	Da ES TO OFFIC		RECTORS
	Electron  S AND DIRECT	TORS ) Delete RLES C RIVE		istered Age		:		ERS AND DII	RECTORS
OFFICER: Title: Name: Address:	Electron  S AND DIRECT  DC ( MAYELL, CHA 651 HERON D DELRAY BEAC	TORS ) Delete RLES C RIVE CH, FL 3 ) Delete ILLIAM F	3444 REV.	istered Age	ADDIT Title: Name: Address	: čip:	ES TO OFFIC	ERS AND DII	RECTORS
OFFICERS Title: Name: Address: City-St-Zip: Title: Name: Address:	Electron  S AND DIRECT  DC ( MAYELL, CHA 651 HERON D DELRAY BEACT  DS ( STEWART, WI 5902 PHOEBE LITHIA, FL 33:	Delete RLES C RIVE CH, FL 3 Delete ILLIAM FINEST DISTANCE DELETE	3444 REV.	istered Age	ADDIT Title: Name: Address City-St-Z Title: Name: Address	: Zip: : : Zip:	ES TO OFFIC	ERS AND DII Addition Addition	RECTORS
OFFICERS  Fitle: Name: Address: City-St-Zip: Fitle: Name: Address: City-St-Zip: Fitle: Name: Address:	Electron  S AND DIRECT  DC ( MAYELL, CHA 651 HERON D DELRAY BEACT  DS ( STEWART, WI 5902 PHOEBE LITHIA, FL 33:  DT ( STRICKLAND, 8604 MINDICH ORLANDO, FL	Delete RLES COURT	3444 REV.	istered Age	ADDIT  Title: Name: Address City-St-Z  Title: Name: Address City-St-Z  Title: Name: Address Address	: Zip: : Zip: : Zip:	ES TO OFFIC  ( ) Change ( )	ERS AND DII Addition Addition	RECTORS

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: CHARLES C. MAYELL DC 04/29/2008