

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N96000005340

FILED
Jan 11, 2008
Secretary of State

Entity Name: FUTURE VISIONS YOUTH DEVELOPMENT INC.

Current Principal Place of Business:

7035 BERACASA WAY
BOCA RATON, FL 33433

New Principal Place of Business:

Current Mailing Address:

PO BOX 335
W ROCKPORT, ME 04865

New Mailing Address:

PO BOX 335
W ROCKPORT, ME 04865 US

FEI Number: 65-0702168

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK INC
941 4TH STREET, SUITE 200
MIAMI BEACH, FL 33139 US

Name and Address of New Registered Agent:

CORPORATE CREATIONS
11380 PROSPERITY FARMS RD.
#221E
PALM BCH GARDENS,, FL 33410 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: TAIDI BEAZ, VP

01/11/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: RETAMAR, RICK
Address: 823 E. HILLSBORO BCH. FLA
City-St-Zip: DEERFIELD BCH,, FL 33441

Title: D () Delete
Name: LAMPERI, LAWRENCE
Address: 7035 S BERACASA WAY
City-St-Zip: BOCA RATON, FL 33433

Title: D () Delete
Name: STEVENS, CHARLES I
Address: 4686 GREAT NORTHERN DR
City-St-Zip: JACKSONVILLE, FL 32257

Title: D () Delete
Name: JORTH, BRUCE
Address: 1555 PALM BEACH LAKES BLVD
City-St-Zip: WEST PALM BEACH, FL 33401

Title: PD () Delete
Name: MILLER, DEBORAH S
Address: PO BOX 204
City-St-Zip: WEST ROCKPORT, ME 04865

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: PD (X) Change () Addition
Name: MILLER, DEBORAH S
Address: PO BOX 335
City-St-Zip: WEST ROCKPORT, ME 04865

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: DEBORAH S. MILLER

PRES

01/11/2008

Electronic Signature of Signing Officer or Director

Date