2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2009
Secretary of State

DOCUMENT# N97000001924

Entity Name: YOUTH FISHING FOUNDATION, INC.

Current Principal Place of Business:

14751 S.W. 252 STREET
HOMESTEAD, FL 33032

New Principal Place of Business:

Current Mailing Address:

14751 S.W. 252 STREET
HOMESTEAD, FL 33032

New Mailing Address:

P.O. BOX 900087
HOMESTEAD, FL 33090

FEI Number: 65-0750456 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PORCO, SAMUEL S JR.
14751 S.W. 252 STREET
HOMESTEAD, FL 33032 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: PD ( ) Delete
Name: DEL VECCHIO, PATRICK F
Address: 7963 SW 104 STREET, A211
City-St-Zip: MIAMI, FL 33156

Title: VD (X) Delete
Name: GOSSMAN, KRISTINA
Address: 655 SE 29 DRIVE
City-St-Zip: HOMESTEAD, FL 33033

Title: SD ( ) Delete
Name: DAVIS, HAYS A
Address: 510 SW 30 DRIVE
City-St-Zip: HOMESTEAD, FL 33033

Title: TD ( ) Delete
Name: SHELLEY, STEPHEN
Address: 165 NW 19 STREET
City-St-Zip: HOMESTEAD, FL 33033

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: TD (X) Change ( ) Addition
Name: SHELBY, STEPHEN
Address: 166 NW 19 STREET
City-St-Zip: HOMESTEAD, FL 33030

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: PATRICK F DELVECCHIO PD 03/19/2009

Electronic Signature of Signing Officer or Director — Date