2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 05, 2004
Secretary of State

DOCUMENT# N97000002197

Entity Name: MEN, WOMEN AND YOUTH IN ACTION, USA INC.

Current Principal Place of Business:

540 PECAN AVE
SANFORD, FL 32771

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 952517
LAKE MARY, FL 327952517

New Mailing Address:

FEI Number: 59-3358267 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BENJAMIN, PAUL SR
540 PECAN AVENUE
SANFORD, FL 32771 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: BENJAMIN, PAUL REV.
Address: 744 SUMMERLAND DRIVE
City-St-Zip: WINTER SPRINGS, FL 32708

Title: T ( ) Delete
Name: BENJAMIN, JACQUELINE
Address: 744 SUMMERLAND DRIVE
City-St-Zip: WINTER SPRINGS, FL 32708

Title: D ( ) Delete
Name: WILSON, FREDERICK
Address: 540 PECAN AVE
City-St-Zip: SANFORD, FL 32771

Title: SD ( ) Delete
Name: STAPLER, SYDELL
Address: 608 WEST 22 STREET
City-St-Zip: SANFORD, FL 32771

Title: C (X) Delete
Name: WOLFE, DICK
Address: 4268 TIDEWATER DRIVE
City-St-Zip: ORLANDO, FL 32812

Title: D ( ) Delete
Name: PESTER, MARK
Address: 540 PECAN AVE
City-St-Zip: SANFORD, FL 32771

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: BENJAMIN, PAUL REV.
Address: 540 PECAN AVE
City-St-Zip: SANFORD, FL 32771

Title: ST (X) Change ( ) Addition
Name: BENJAMIN, JACQUELINE
Address: 540 PECAN AVE
City-St-Zip: SANFORD, FL 32771

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 for the exemption stated in Section 119.07(3)(i), 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: PAUL BENJMIN SR. P 05/05/2004
Electronic Signature of Signing Officer or Director — Date