2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N97000004381

Entity Name: SOUTH FLORIDA YOUTH ASSOCIATION, INC.

FILED Nov 09, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

110 EAST ATLANTIC AVE 10199 182ND LANE SOUTH 320 BOCA RATON, FL 33498

DELRAY BEACH, FL 33444

Current Mailing Address: New Mailing Address:

110 EAST ATLANTIC AVE 10199 182ND LANE SOUTH 320 BOCA RATON, FL 33498 DELRAY BEACH. FL 33444

FEI Number: 65-0779341 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

BECKER, WILLIAM R

110 EAST ATLANTIC AVE

320

BOCA RATON, FL 33498

USBER BACKER, WILLIAM R

TRAVERSO, ELLEN M

10199 182ND LANE SOUTH

BOCA RATON, FL 33498

USBER BACKER, WILLIAM R

DELRAY BEACH, FL 33444 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: ELLEN M TRAVERSO 11/09/2004

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PC () Delete Title: () Change () Addition Name: BECKER, WILLIAM R. P,C Name:

Name:BECKER, WILLIAM R. P,CName:Address:110 EAST ATLANTIC AVEAddress:City-St-Zip:DELRAY BEACH, FL 33444City-St-Zip:

Title: () Delete Title: (X) Change () Addition Name: COHEN, MATTHEW J D,T,S Name: COHEN, MATTHEW J D,T,S Address: 110 EAST ATLANTIC AVE Address: 10199 182ND LANE SOUTH City-St-Zip: DELRAY BEACH, FL 33444 City-St-Zip: BOCA RATON, FL 33498

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: MATTHEW J COHEN D,T 11/09/2004