

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003882

FILED  
Feb 05, 2005  
Secretary of State

**Entity Name:** YOUTH EMPOWERMENT ALLIANCE, INC.

**Current Principal Place of Business:**

235 CENTRAL AVENUE  
ST. PETERSBURG, FL 33701

**New Principal Place of Business:**

**Current Mailing Address:**

235 CENTRAL AVENUE  
ST. PETERSBURG, FL 33701

**New Mailing Address:**

**FEI Number:** 59-3675296

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WHEATLY SACINO, SHERRY  
235 CENTRAL AVENUE  
ST. PETERSBURG, FL 33701 US

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

WHEATLEY SACINO, SHERRY  
235 CENTRAL AVENUE  
ST. PETERSBURG, FL 33701 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: SHERRY W. SACINO

02/05/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: SACINO, SHERRY  
Address: 235 CENTRAL AVE  
City-St-Zip: SAINT PETERSBURG, FL 33701

Title: VPD ( ) Delete  
Name: SACINO, RON  
Address: 2507 PASS-A-GRILLE WAY  
City-St-Zip: PASS-A-GRILLE BEACH, FL 33706

Title: STD ( ) Delete  
Name: SHARER, LARRY  
Address: 100 SECOND AVE SOUTH #600  
City-St-Zip: SAINT PETERSBURG, FL 33701

**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:

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: SHERRY W. SACINO

MS.

02/05/2005

Electronic Signature of Signing Officer or Director

Date