

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 729365

FILED
Jan 04, 2006
Secretary of State

Entity Name: CROSSWINDS YOUTH SERVICES, INC.

Current Principal Place of Business:

1407 DIXON BLVD.
COCOA, FL 32922

New Principal Place of Business:

Current Mailing Address:

1407 DIXON BLVD.
COCOA, FL 32922

New Mailing Address:

FEI Number: 23-7376943

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOKAY, JANET G
1407 DIXON BLVD
COCOA, FL 32922 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: D () Delete
Name: HEMME, DAVE
Address: 12 PLANTATION DRIVE #203
City-St-Zip: VERO BEACH, FL 32966

Title: CH () Delete
Name: HANDLEY, CYNTHIA
Address: 10 WILLOW GREEN DRIVE
City-St-Zip: COCOA BEACH, FL 32931

Title: DT () Delete
Name: GOLDMAN, MITCHELL
Address: 98 WILLARD ST., SUITE 302
City-St-Zip: COCOA, FL

Title: D () Delete
Name: LEHTON, ROBERT
Address: 3000 N ATLANTIC AVE STE 102
City-St-Zip: COCA BCH, FL 32931

Title: S () Delete
Name: PARKER, JACK
Address: 3510 SAVANNAH'S TRAIL
City-St-Zip: MERRITT ISLAND, FL 32953

Title: D () Delete
Name: WILSON, SHANNON
Address: 5405 FLORIDA PALM AVE
City-St-Zip: COCOA, FL 32926

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: () 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 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: JAN LOKAY

CEO

01/04/2006

Electronic Signature of Signing Officer or Director

Date