

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000285

Entity Name: YOUTH SOLUTIONS, INC.

FILED
Sep 03, 2008
Secretary of State

Current Principal Place of Business:

845 SOUTH ORANGE BLOSSOM CIRCLE
BARTOW, FL 33830

New Principal Place of Business:

335 EAST B STREET
FROSTPROOF, FL 33843

Current Mailing Address:

845 SOUTH ORANGE BLOSSOM CIRCLE
BARTOW, FL 33830

New Mailing Address:

335 EAST B STREET
FROSTPROOF, FL 33843

FEI Number: 26-0037131 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
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:

JOSEPH, JOHN P ESQ
5501-31ST STREET SOUTH
ST PETERSBURG, FL 33712 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: PTD () Delete
Name: WEATHERHOLT, ROBERT K
Address: 845 SOUTH ORANGE BLOSSOM CIRCLE
City-St-Zip: BARTOW, FL 33830

Title: VPTD () Delete
Name: JOSEPH, JOHN
Address: 5501-301 ST SOUTH
City-St-Zip: SAINT PETERSBURG, FL 33712

Title: TD () Delete
Name: MANER, EDWARD
Address: 3819 LAKEWOOD LN
City-St-Zip: LAKELAND, FL 33805

Title: TD () Delete
Name: GREENWAY, TIMOTHY
Address: 2505 CLAMBED CT.
City-St-Zip: MATTHEWS, NC 28105

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: WEATHERHOLT, ROBERT K
Address: 335 EAST B STREET
City-St-Zip: FROSTPROOF, FL 33843

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 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: ROBERT WEATHERHOLT

PTD

09/03/2008

Electronic Signature of Signing Officer or Director

Date