

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 729365

Entity Name: CROSSWINDS YOUTH SERVICES, INC.**Current Principal Place of Business:**1407 DIXON BLVD.
COCOA, FL 32922**Current Mailing Address:**1407 DIXON BLVD.
COCOA, FL 32922**FEI Number: 23-7376943****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**LOKAY, JANET G
1407 DIXON BLVD
COCOA, FL 32922 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	DIR
Name	STOCKTON, WHITTEN
Address	222 PEBBLE HILL WAY
City-State-Zip:	ROCKLEDGE FL 32955

Title	PCH
Name	LEHTON, ROBERT
Address	3000 N ATLANTIC AVE STE 102
City-State-Zip:	COCOA BCH FL 32931

Title	DIRECTOR
Name	WILSON, SHANNON
Address	5405 FLORIDA PALM AVE
City-State-Zip:	COCOA FL 32926

Title	VC
Name	SHAH, SUMMIT
Address	402-A HIGH POINT DRIVE COCOA
City-State-Zip:	FL FL 32926

Title	PCH
Name	GOLDMAN, MITCHELL
Address	98 WILLARD ST., SUITE 302
City-State-Zip:	COCOA FL

Title	DIRECTOR
Name	PARKER, JACK
Address	3260 SAVANNAH'S TRAIL
City-State-Zip:	MERRITT ISLAND FL 32953

Title	PRESIDENT/CEO
Name	LOKAY, JANET G
Address	1407 DIXON BLVD.
City-State-Zip:	COCOA FL 32922

Title	CHAIRMAN
Name	CREWS, GREG
Address	4055 LEONA COURT
City-State-Zip:	MERRITT ISLAND FL 32952

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I hereby 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 all other like empowered.

SIGNATURE: JANET G. LOKAY**PRESIDENT/CEO****05/07/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title DIRECTOR
Name CUNNION, DARA
Address 1 WILLOW GREEN DRIVE
City-State-Zip: COCOA BEACH FL 32931

Title SECRETARY
Name IVEY, WAYNE
Address 700 PARK AVENUE
City-State-Zip: TITUSVILLE FL 32780

Title DIRECTOR
Name MALONE, ALISON
Address 2230 SYKES CREEK DRIVE
City-State-Zip: MERRITT ISLAND FL 32953

Title DIRECTOR
Name WALTERS, ANDREW
Address 2290 COLUMBIA BLVD.
City-State-Zip: TITUSVILLE FL 32780

Title DIRECTOR
Name GADODIA, NINA
Address 129 LANSING ISLAND DRIVE
City-State-Zip: INDIAN HARBOUR BEACH FL 32937

Title DIRECTOR
Name HANDLEY, JAMES
Address 10 WILLOW GREEN DRIVE
City-State-Zip: COCOA BEACH FL 32931

Title DIRECTOR
Name JUSTICE, WAYNE
Address 502 COCOA ISLES BLVD.
City-State-Zip: COCOA BEACH FL 32931

Title TREASURER
Name NASH, CHARLES
Address 440 S BABCOCK STREET
City-State-Zip: MELBOURNE FL 32901

Title DIRECTOR
Name WEINBERG, TOM
Address 445 CHALLENGER ROAD
SUITE 301
City-State-Zip: CAPE CANAVERAL FL 32920

Title DIRECTOR
Name HAMMERLING, SUSAN
Address 1407 DIXON BLVD.
City-State-Zip: COCOA FL 32922