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. 05/01/2022

SIGNATURE: KIMBERLY THOMAS

Electronic Signature of Signing Officer/Director Detail

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N1200004026

Entity Name: ANOTHER CRY YOUTH FOUNDATION, INC.

Current Principal Place of Business:

4377 CRAWFORDVILLE ROAD SUITE C TALLAHASSEE, FL 32305

Current Mailing Address:

4377 CRAWFORDVILLE ROAD SUITE C TALLAHASSEE, FL 32305 US

FEI Number: APPLIED FOR

Name and Address of Current Registered Agent:

THOMAS, KIMBERLY L 8430 BLACK JACK ROAD TALLAHASSEE, FL 32305 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:

Officer/Direc

Title	Ρ	Title	VP
Name	THOMAS, KIMBERLY L	Name	THOMAS, LEE A JR
Address	8430 BLACK JACK ROAD	Address	8430 BLACK JACK ROAD
City-State-Zip:	TALLAHASSEE FL 32305	City-State-Zip:	TALLAHASSEE FL 32305

Electronic Signature of Registered Agent					
tor Detail :					
P	Title	VP			
THOMAS, KIMBERLY L	Name	THOMAS, LEE A JR			

Certificate of Status Desired: No

FILED May 01, 2022 Secretary of State 1574825136CC

Date

Date