

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000007221

Entity Name: YOU MOM, INC.**Current Principal Place of Business:**133 HERON PARKWAY
ROYAL PALM BEACH, FL 33411**Current Mailing Address:**133 HERON PARKWAY
ROYAL PALM BEACH, FL 33411**FEI Number:** 47-1558032**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NELSON, AIMEE
133 HERON PARKWAY
ROYAL PALM BEACH, FL 33411 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:** AIMEE NELSON

01/20/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PD
Name	NELSON, AIMEE
Address	133 HERON PARKWAY
City-State-Zip:	ROYAL PALM BEACH FL 33411

Title	TD
Name	GUNN, CHELSEA
Address	132 TIMBER LANE
City-State-Zip:	JUPITER FL

Title	SD
Name	WEBB-LAGUE, KIMBERLY
Address	219 GOLF CLUB CIRCLE
City-State-Zip:	TEQUESTA FL 33469

Title	D
Name	BURROUGHS, CYNTHIA
Address	3301 LAUDERDALE LAKES
City-State-Zip:	FORT LAUDERDALE FL

Title	ASST. SECRETARY
Name	PLOURDE, CHERYL
Address	12925 159TH CT
City-State-Zip:	JUPITER FL 33478

Title	ASST. TREASURER
Name	MCCOWEN, GENA
Address	202 NE MIDFIELD LANE
City-State-Zip:	PORT ST. LUCIE FL 34983

Title	DIRECTOR
Name	CHIURATO, CAROLINE ELIZABETH
Address	19059 SE KOKOMO LANE
City-State-Zip:	JUPITER FL 33458

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: AIMEE NELSON

PD

01/20/2020

Electronic Signature of Signing Officer/Director Detail

Date