

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18000007902

Entity Name: CHOSEN YOUTH FOUNDATION, INC.**Current Principal Place of Business:**12901 MCGREGOR BLVD., #20-184
FORT MYERS, FL 33919**Current Mailing Address:**12901 MCGREGOR BLVD., #20-184
FORT MYERS, FL 33919 US**FEI Number: 83-1130704****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**OUTTEN, NICOLE
12901 MCGREGOR BLVD., #20-184
FORT MYERS, FL 33919 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 | P |
| Name | OUTTEN, NICOLE |
| Address | 12901 MCGREGOR BLVD., #20-184 |
| City-State-Zip: | FORT MYERS FL 33919 |

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| Title | V |
| Name | WILLIAMS, MEDERICKA |
| Address | 12901 MCGREGOR BLVD., #20-184 |
| City-State-Zip: | FORT MYERS FL 33919 |

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|-----------------|-------------------------------|
| Title | BM |
| Name | TERRELL, KISHEA |
| Address | 12901 MCGREGOR BLVD., #20-184 |
| City-State-Zip: | FORT MYERS FL 33919 |

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|-----------------|-------------------------------|
| Title | BM |
| Name | WRIGHT, PHOENICIA |
| Address | 12901 MCGREGOR BLVD., #20-184 |
| City-State-Zip: | FORT MYERS FL 33919 |

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|-----------------|-------------------------------|
| Title | V |
| Name | OUTTEN, JAMIE |
| Address | 12901 MCGREGOR BLVD., #20-184 |
| City-State-Zip: | FORT MYERS FL 33919 |

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|-----------------|-------------------------------|
| Title | T |
| Name | OUTTEN, JALEN |
| Address | 12901 MCGREGOR BLVD., #20-184 |
| City-State-Zip: | FORT MYERS FL 33919 |

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|-----------------|-------------------------------|
| Title | BM |
| Name | VALENTIN, ISRAEL |
| Address | 12901 MCGREGOR BLVD., #20-184 |
| City-State-Zip: | FORT MYERS FL 33919 |

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: NICOLE OUTTEN**EXECUTIVE DIRECTOR****06/25/2020**

Electronic Signature of Signing Officer/Director Detail

Date