

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N96000001969

**FILED**  
**Feb 23, 2015**  
**Secretary of State**  
**CC3992240618**

**Entity Name:** PRIDELINES YOUTH SERVICES, INC.

**Current Principal Place of Business:**

9526 NE 2 AVENUE  
104  
MIAMI SHORES, FL 33138

**Current Mailing Address:**

PO BOX 014340  
MIAMI, FL 33101 US

**FEI Number:** 65-0670159

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

DIAZ-HERMAN, VICTOR E  
9526 NE 2 AVENUE  
104  
MIAMI SHORES, FL 33138 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 EXECUTIVE DIRECTOR  
Name DIAZ-HERMAN, VICTOR E  
Address PO BOX 014340  
City-State-Zip: MIAMI FL 33101

Title BOARD MEMBER  
Name AVILA, FRANK  
Address PO BOX 014340  
City-State-Zip: MIAMI FL 33101

Title SECRETARY  
Name MURRY, RICHARD  
Address PO BOX 014340  
City-State-Zip: MIAMI FL 33101

Title BOARD MEMBER  
Name LOUIS, JAMESLY  
Address PO BOX 014340  
City-State-Zip: MIAMI FL 33101

Title BOARD MEMBER  
Name ROLDAN, NICOLAS  
Address PO BOX 014340  
City-State-Zip: MIAMI FL 33101

Title TREASURER  
Name HECHT, JEFFREY  
Address PO BOX 014340  
City-State-Zip: MIAMI FL 33101

Title BOARD MEMBER  
Name GONZALEZ, RICHARD ESQ.  
Address PO BOX 014340  
City-State-Zip: MIAMI FL 33101

Title CHAIRPERSON  
Name SCHEIDT, NICHOLAS PHD  
Address PO BOX 014340  
City-State-Zip: MIAMI FL 33101

**Continues on page 2**

*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:** VICTOR E. DIAZ-HERMAN

**EXECUTIVE DIRECTOR**

**02/23/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title BOARD MEMBER  
Name KING, KRISTI  
Address PO BOX 014340  
City-State-Zip: MIAMI FL 33101