

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N98000004706

**FILED**  
**Mar 09, 2018**  
**Secretary of State**  
**CC5108213831**

**Entity Name:** AMERICAN ASSOCIATION OF CAREGIVING YOUTH, INC.

**Current Principal Place of Business:**

1515 N. FEDERAL HWY  
#218  
BOCA RATON, FL 33432

**Current Mailing Address:**

1515 N. FEDERAL HWY  
#218  
BOCA RATON, FL 33432 US

**FEI Number:** 65-0866677

**Certificate of Status Desired:** No

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

SISKOWSKI, CONSTANCE  
2021 NW 53 RD ST  
BOCA RATON, FL 33496 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:** CONSTANCE SISKOWSKI

03/09/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name SISKOWSKI, CONSTANCE PHD  
Address 2021 NW 53RD ST  
City-State-Zip: BOCA RATON FL 33496

Title CHAIRMAN  
Name KRAUS, JOE  
Address 2931 NE 23RD STREET  
City-State-Zip: POMPANO BEACH FL 33062

Title T  
Name KING, COREY  
Address 777 GLADES RD  
City-State-Zip: BOCA RATON FL 33431

Title VC  
Name DAVIDOWITZ, DAN  
Address 8535 BREEZY OAK WAY  
City-State-Zip: BOYNTON BEACH FL 33473

Title DIRECTOR  
Name EAGLE, GAIL  
Address 6622 NW 25TH WAY  
City-State-Zip: BOCA RATON FL 33496

Title DIRECTOR  
Name MILLER, MIKE  
Address 950 N UNIVERSITY DR  
City-State-Zip: CORAL SPRINGS FL 33071

Title DIRECTOR  
Name PARRADO, ISABEL  
Address 723 BLUEBERRY DR  
City-State-Zip: WELLINGTON FL 33414

Title DIRECTOR  
Name CEASOR, ALTHEA  
Address 2228 RIDGEWOOD CIRCLE  
City-State-Zip: ROYAL PALM BEACH FL 33411

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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:** CONSTANCE SISKOWSKI

PRESIDENT

03/09/2018

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name INGUANZO-MARTIN, ROSIE  
Address 898 SW 22ND STREET  
City-State-Zip: BOCA RATON FL 33486

Title DIRECTOR  
Name PORES, JOSEPH  
Address 19373 LOST OAKS LANE  
City-State-Zip: BOCA RATON FL 33498

Title DIRECTOR  
Name ANDREWS, MARCIA  
Address 3300 FOREST HILL BLVD  
City-State-Zip: WEST PALM BEACH FL 33406