

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000112

Entity Name: P & B YOUTH SERVICES, INC.

FILED  
Apr 08, 2006  
Secretary of State

## Current Principal Place of Business:

1124 PARK LANE  
JASPER, FL 32052

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 1929  
JASPER, FL 32052

## New Mailing Address:

FEI Number: 80-0024914

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

POLLOCK, DWIGHT  
1124 PARK LANE  
JASPER, FL 32052 US

## Name and Address of New Registered Agent:

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

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: POLLOCK, DWIGHT  
Address: P.O. BOX 129  
City-St-Zip: JASPER, FL 32052

Title: DV ( ) Delete  
Name: BRINSON, PATRICK  
Address: P.O. BOX 129  
City-St-Zip: JASPER, FL 32052

Title: DS ( ) Delete  
Name: POLLOCK, JACQUELINE  
Address: P.O. BOX 129  
City-St-Zip: JASPER, FL 32052

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: POLLOCK, DWIGHT  
Address: P.O. BOX 1929  
City-St-Zip: JASPER, FL 32052

Title: DV (X) Change ( ) Addition  
Name: BRINSON, PATRICK  
Address: P.O. BOX 1929  
City-St-Zip: JASPER, FL 32052

Title: DS (X) Change ( ) Addition  
Name: POLLOCK, JACQUELINE  
Address: P.O. BOX 1929  
City-St-Zip: JASPER, FL 32052

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DWIGHT POLLOCK

PRES

04/08/2006

Electronic Signature of Signing Officer or Director

Date