2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000112

City-St-Zip:

JASPER, FL 32052

FILED Apr 28, 2008 Secretary of State

Entity Name: P & B YOUTH SERVICES, INC. **Current Principal Place of Business: New Principal Place of Business:** 1124 PARK LANE JASPER, FL 32052 **Current Mailing Address: New Mailing Address:** P.O. BOX 1929 JASPER, FL 32052 FEI Number: 80-0024914 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: POLLOCK, DWIGHT 1124 PARK LANE JASPER, FL 32052 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: DP () Delete () Change () Addition POLLOCK, DWIGHT Name: Name: Address: P.O. BOX 1929 Address: City-St-Zip: JASPER, FL 32052 City-St-Zip: Title: DV () Delete Title: () Change () Addition BRINSON, PATRICK Name: Name: Address: P.O. BOX 1929 Address: City-St-Zip: JASPER, FL 32052 City-St-Zip: Title: () Delete Title: () Change () Addition POLLOCK, JACQUELINE Name: Name: P.O. BOX 1929 Address: Address:

I hereby certify that the information supplied with this filing does not qualify 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.

City-St-Zip:

SIGNATURE: DWIGHT POLLOCK PRES 04/28/2008