2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2007 8:00 am
Secretary of State
04-26-2007 90180 019 ****61.25

DOCUMENT # N06000006757

1. Entity Name
FLORIDA YOUTH AT RISK, INC.

Principal Place of Business	Mailing Address
1032 GRANVILLE CT N #4 ST PETERSBURG, FL 33701	1032 GRANVILLE CT N #4 ST PETERSBURG, FL 33701

04222007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 20-5059090 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
SEELEY, GREGORY B PA 3924 CENTRAL AVE ST PETERSBURG, FL 33711	Name Catherine Blackburn Street Address (P.O. Box Number is Not Acceptable) SHAPIRO LAW GROUP 1732 MANATEE AVE WEST City BRADENTON FL Zip Code 34205

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Catherine E. Blackburn Catherine E. Blackburn 4/23/07
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25 Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ARNOLD, SANDY 1032 GRANVILLE CT N #4 ST PETERSBURG, FL 33701	☒ Delete	D Catherine BLACKBURN 1732 MANATEE AVE W BRADENTON FL 34205	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BROOKS, MAIDA PO BOX 16835 ST PETERSBURG, FL 33733	☐ Delete	D GLORIA HEVIA 13220 Belcher Rd S, Largo, FL 33773	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KEENEY, MICHAEL 154 45TH AVE NE ST PETERSBURG, FL 33703	☐ Delete	D SHAWN Milligan 6321 NewtownCircle B4 TAMPA, FL 33773	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LAWrence Stromingeer P.O. BOX 2916 TAMPA, FL 33601	☐ Delete Add	T, D Karen Olsen 16109 Darnell Rd Lutz, FL 33549	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DENISE COBURN 3804 CountryClubRd N. St Petersburg, FL 33710	☐ Delete Add	D, VP Bill Trudelle 4100 W. KENNEDY Blvd, #301 TAMPA, FL 33609	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Bill BELL 4536 W. MINNEHAHA ST TAMPA, FL 33614	☐ Delete Add	D, S RANDI NORMAN 1311 Mohrlake Dr BRANDON, FL 33615	☐ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Karen L Olsen KAREN L. OLSEN Treasurer 4/22/07 813-758 2021
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #