

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000007327

FILED
Jun 16, 2010
Secretary of State

Entity Name: THE VILLAGE YOUTH SERVICES, INC.

Current Principal Place of Business:

610 NW 183 STREET
SUITE 208
MIAMI GARDENS, FL 33169

New Principal Place of Business:

1900 NW 36 STREET
MIAMI, FL 33142

Current Mailing Address:

PO BOX 530091
MIAMI SHORES, FL 331530091

New Mailing Address:

FEI Number: 26-0612140

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

NOBLE, LAMEKKA
610 NW 183 STREET
SUITE 208
MIAMI GARDENS, FL 33169 US

Name and Address of New Registered Agent:

NOBLE, LAMEKKA
1900 NW 36 STREET
MIAMI, FL 33142 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:

06/16/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP
Name: NOBLE, LAMEKKA
Address: PO BOX 530091
City-St-Zip: MIAMI SHORES, FL 33153

Title: D
Name: ALEXANDER-LEE, SHAWNDR E
Address: PO BOX 530091
City-St-Zip: MIAMI SHORES, FL 33153

Title: D
Name: SINGLETON-KINDRED, LASHOAN
Address: PO BOX 69-4925
City-St-Zip: MIAMI, FL 33269

Title: D
Name: JOHNSON, MORRIS DR.
Address: PO BOX 530091
City-St-Zip: MIAMI SHORES, FL 33153

Title: D
Name: ANDREWS, KENYATTA CPA
Address: PO BOX 530091
City-St-Zip: MIAMI SHORES, FL 33153

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: LAMEKKA NOBLE

DP

06/16/2010

Electronic Signature of Signing Officer or Director

Date