

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED

04 JUN 10 PM 12:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # N92000000420	
1. Entity Name FRIENDS OF CHILDREN, YOUTH AND FAMILIES, INCORPORATED	



Principal Place of Business 7272 W. OAKLAND PARK BLVD LAUDERHILL, FL 33313 US	Mailing Address 7272 W. OAKLAND PARK BLVD LAUDERHILL, FL 33313 US
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

05172004	Chg-NP	CR2E037 (10/03)
4. FEI Number 65-0376540		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent MCDONALD-WILSON, MARY 6471 KIMBERLY BLVD. NORTH LAUDERDALE, FL 33069	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	Zip Code

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 <i>Mary McDonald-Wilson</i>	DATE <i>5/18/04</i>

Filing Fee is \$61.25 Due by September 8, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD WILLIAMS, NORBERT <input checked="" type="checkbox"/> Delete 5400 NW 64TH TERRACE LAUDERHILL, FL 33319
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV RUSH-ADAMS, BEATRICE <input checked="" type="checkbox"/> Delete 5300 NW 12TH COURT LAUDERHILL, FL 33313
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV HAMILTON, WAYNE <input checked="" type="checkbox"/> Delete 5315 NW 122ND DRIVE CORAL SPRINGS, FL 33076
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BEETS, JANET <input checked="" type="checkbox"/> Delete 6619 S.W. 41ST PLACE FT. LAUDERDALE, FL 33314
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD JONES, PATSY <input type="checkbox"/> Delete 1741 NW 51ST AVENUE LAUDERHILL, FL 33313
TITLE NAME STREET ADDRESS CITY-ST-ZIP	LCD WILLIAMS, LEVI <input type="checkbox"/> Delete 200 S.E. 13TH AVENUE FT. LAUDERDALE, FL 33313

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD Rush-Adams, Beatrice <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 5300 NW 12th Court Lauderhill, Fl. 33313
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV Beets, Janet <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 6619 SW 4th Place Ft. Lauderdale, Fl. 33076
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Hamilton, Wayne <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 5315 NW 122nd Drive Coral Springs, Fl. 33076
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: <i>Willie Myles</i>	DATE: <i>5/18/04</i> (959) 578-8399 X123