

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2001 8:00 am
Secretary of State
 04-30-2001 90140 020 ****70.00

UJ1/4020U

DOCUMENT # N97000000874

1. Entity Name

CONCERN FOR ALL YOUTH, INC.

Principal Place of Business

1813 3RD AVE. WEST
 PALMETTO FL 34221

Mailing Address

1813 3RD AVE. WEST
 PALMETTO FL 34221

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Manatee

Zip

Country

Manatee

4. FEI Number

59-3403533

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

SHERMAN, LEWIS W
2210 11ST SOUTH
ST PETERSBURG FL 34221

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	ISOM, BERNICE	
STREET ADDRESS	1813 3RD AVE W	
CITY-ST-ZIP	PALMETTO FL 34221	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	MORALES, PAULA R	
STREET ADDRESS	721 7TH ST. WEST	
CITY-ST-ZIP	PALMETTO FL 34221	
TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	DEY, PATRICIA	
STREET ADDRESS	1520 4TH AVE E	
CITY-ST-ZIP	BRADENTON FL 34208	
TITLE	T	<input type="checkbox"/> Delete
NAME	ISOM, MICHAEL	
STREET ADDRESS	2510 21ST ST. WEST	
CITY-ST-ZIP	BRADENTON FL 34208	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	MOTEN, MILDRED	
STREET ADDRESS	1816 5TH STREET W	
CITY-ST-ZIP	PALMETTO FL 34221	
TITLE	D	<input type="checkbox"/> Delete
NAME	MURRAY, RUTH	
STREET ADDRESS	1811 3RD AVE W	
CITY-ST-ZIP	PALMETTO FL 34221	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<i>Sophia Bailey</i>
STREET ADDRESS	<i>2021 3rd Ave West</i>
CITY-ST-ZIP	<i>Palmetto FL 34221</i>
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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:

Bernice Isom

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/01

Date

Daytime Phone #

CR2E037 (10/00)