ANNUAL REPORT (AR)

DOCUMENT # N97000000874 **FILED** 1. Entity Name Feb 19, 2007 08:00 AM Secretary of State CONCERN FOR ALL YOUTH, INC. Principal Place of Business Mailing Address 1813 3RD AVE. WEST 1813 3RD AVE. WEST PALMETTO FL 34221 PALMETTO FL 34221 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/06) City & State Applied For City & State 4. FEI Number 59-3403533 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SHERMAN, LEWIS W 2210 11ST SOUTH Street Address (P.O. Box Number is Not Acceptable) ST PETERSBURG FL 34221 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 (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Due By May 1, 2007 Added to Fees Florida Department of State 10, OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE Delete шиг ☐ Change Addition ISOM, BERNICE NAME 000000641791 03/01/07-80013-024 70.00 STRUET ADDRESS 1813 3RD AVE W STREET ADDRESS CITY-SI-7IP PALMETTO FL 34221 CITY-ST-ZIP HILL Dolete ☐ Change Addition TITLE NAME BAILEY, OPHELIA NAME STREET ADDRESS 2021 3RD AVE WEST STREET ADDRESS CITY-SI-ZIP CITY-ST-71P PALMETTO FL 34221 HILE TITLE Change Addition Delete NAME NAME ISOM, MICHAEL STREET ADDRESS STREET ADDRESS 2510 21ST ST. WEST CITY-ST-7IP CHY-SI-7/P BRADENTON FL 34208 TITLE Delete HILE ☐ Change ☐ Addition VPD NAME NAME MOTEN, MILDRD STREET ADDRESS STREET ADDRESS 1816 5TH STREET W CHY-ST-ZIP CITY-ST-ZIP PALMETTO FL 34221 TITLE ☐ Delete TITLE Change Addition NAME MURRAY, RUTH NAME STREET ADDRESS 1811 3RD AVE W STREET ADDRESS CITY-ST-ZIP PALMETTO FL 34221 CHTY-ST-7/P TILLE Delete TITLE ☐ Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY - ST- ZIP CHTY-ST-ZIP

12. I heroby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statules, 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:

SIGNATURE:

SIGNATURE: