

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 18, 2003 8:00 am
Secretary of State

04-18-2003 90449 020 ****61.25

DOCUMENT # N98000006998

1. Entity Name
COMMUNITY YOUTH IN ACTION, INC.



Principal Place of Business
**137 NW 15TH CT.
POMPANO BCH FL 33060**

Mailing Address
**137 NW 15TH CT.
POMPANO BCH FL 33060**

10078081



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0960362**

☒ 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

**FRANCES, CARTER
137 NW 15TH CT.
POMPANO BCH FL 33060**

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

SIGNATURE *Frances Carter*
Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/13/03
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
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	TP	<input type="checkbox"/> Delete
NAME	CARTER, FRANCES	
STREET ADDRESS	137 N.W. 15 CT	
CITY-ST-ZIP	POMPANO BEACH FL 33060	
TITLE	I	<input type="checkbox"/> Delete
NAME	DERICO, MARTIN JR.	
STREET ADDRESS	6610 SW 18TH ST	
CITY-ST-ZIP	POMPANO BEACH FL 33068	
TITLE	TVP	<input type="checkbox"/> Delete
NAME	ATKINS, BARBARA	
STREET ADDRESS	3031 N.W. 6 CT	
CITY-ST-ZIP	POMPANO BEACH FL 33069	
TITLE	S	<input type="checkbox"/> Delete
NAME	DERICO, CHRISTINE	
STREET ADDRESS	6610 SW 18 ST	
CITY-ST-ZIP	POMPANO BEACH FL 33068	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
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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:

Frances Carter
REQUIRED

4/13/03 *6541946-0640*

CR2E037 (10/02)