

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000062652

FILED
Aug 22, 2007
Secretary of State

Entity Name: FAMILY AND YOUTH INITIATIVES, INC.

Current Principal Place of Business:

7343 DAVIE ROAD EXTENSION
DAVIE, FL 33024

New Principal Place of Business:

Current Mailing Address:

7343 DAVIE ROAD EXTENSION
DAVIE, FL 33024

New Mailing Address:

FEI Number: 20-1514991

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIEGEL, WENDI F ED.D.
22872 EL DORADO DR
BOCA RATON, FL FL 33433 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SIEGEL, WENDI F ED.D.
Address: 22872 EL DORADO DR
City-St-Zip: BOCA RATON, FL 33433

Title: V (X) Delete
Name: SIEGEL, NATALIE R
Address: 7343 DAVIE ROAD EXTENSION
City-St-Zip: DAVIE, FL 33024

Title: D () Delete
Name: SIEGEL, TEDD L
Address: 7343 DAVIE ROAD EXTENSION
City-St-Zip: DAVIE, FL 33024

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WENDI F. SIEGEL

DR

08/22/2007

Electronic Signature of Signing Officer or Director

Date