

**2018 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N01000002000

**Entity Name:** FAMILY AND YOUTH HELP CENTER, INC.**Current Principal Place of Business:**2815 NW 169 TER  
MIAMI GARDENS, FL 33056**Current Mailing Address:**2815 NW 169 TER  
MIAMI GARDENS, FL 33056 US**FEI Number: 03-0442422****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**ROBERTS, PAULETTA V  
2815 NW 169 TER  
MIAMI GARDENS, FL 33056 US*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: PAULETTA V ROBERTS****06/04/2018**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title CEO  
Name ROBERTS, PAULETTA V  
Address 2815 NW 169 TER  
City-State-Zip: MIAMI GARDENS FL 33056

Title CEO  
Name GLOVER, CLYDER B  
Address 16860 NW 79 PL  
City-State-Zip: MIAMI LAKES FL 33016

Title VP  
Name LESLIE, TYONNA T  
Address 149 N STREEPER ST  
City-State-Zip: BALTIMORE MD 21224

Title TREASURER  
Name LOCKETT, SHERRI  
Address 1015 WILMINGTON ST  
City-State-Zip: OPA LOCKA FL 33054

Title SECRETARY  
Name LOCKHART, SHERRI  
Address 545 SW 4TH ST  
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City-State-Zip: BELLE GLADE FL 33430

*I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: PAULETTA V ROBERTS****CEO****06/04/2018**

Electronic Signature of Signing Officer/Director Detail

Date