

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08742

**Entity Name:** ECKERD YOUTH ALTERNATIVES, INC.**Current Principal Place of Business:**100 STARCREST DRIVE  
CLEARWATER, FL 33765**Current Mailing Address:**100 STARCREST DRIVE  
CLEARWATER, FL 33765**FEI Number:** 59-2551416**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NATIONAL CORPORATE RESEARCH, LTD., INC.  
155 OFFICE PLAZA DRIVE  
TALLAHASSEE, FL 32301 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D  
Name SHANAHAN, KATHLEEN  
Address 100 STARCREST DRIVE  
City-State-Zip: CLEARWATER FL 33758

Title PRESIDENT  
Name DENNIS, DAVID  
Address 100 STARCREST DRIVE  
City-State-Zip: CLEARWATER FL 33758

Title S  
Name HUNT, LAURA  
Address 100 STARCREST DRIVE  
City-State-Zip: CLEARWATER FL 33758

Title D  
Name SWANN, JAMES T  
Address 100 STARCREST DRIVE  
City-State-Zip: CLEARWATER FL 33758

Title CHAIRMAN  
Name FERRARA, V. RAYMOND  
Address 100 STARCREST DRIVE  
City-State-Zip: CLEARWATER FL 33758

Title T  
Name LUECKE, RANDALL W.  
Address 100 STARCREST DRIVE  
City-State-Zip: CLEARWATER FL 33758

Title DIRECTOR  
Name DEWAN, DR. NICK  
Address 100 STARCREST DRIVE  
City-State-Zip: CLEARWATER FL 33765

Title DIRECTOR  
Name ECKERD-NICHOLS, NANCY  
Address 100 STARCREST DRIVE  
City-State-Zip: CLEARWATER FL 33765

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*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: DAVID DENNIS****PRESIDENT****05/01/2013**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name STARKEY, TREY  
Address 100 STARCREST DRIVE  
City-State-Zip: CLEARWATER FL 33765

Title DIRECTOR  
Name KIMERICK, EILEEN  
Address 100 STARCREST DRIVE  
City-State-Zip: CLEARWATER FL 33765

Title DIRECTOR  
Name HARDIMAN, DENNIS  
Address 100 STARCREST DRIVE  
City-State-Zip: CLEARWATER FL 33765