

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N14000007887

**Entity Name:** FAITH YOUTH SERVICES, INC.**Current Principal Place of Business:**2029 BONITA WAY SOUTH  
ST.PETERSBURG, FL 33712**Current Mailing Address:**2029 BONITA WAY SOUTH  
ST.PETERSBURG, FL 33712 US**FEI Number: 47-1399778****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**BURNETT, BEVERLY  
2029 BONITA WAY SOUTH  
ST.PETERSBURG, FL 33712 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	PD
Name	KROUT, TIM
Address	6100 12TH ST S., APT.223
City-State-Zip:	ST.PETERSBURG FL 32712

Title	VPD
Name	CAVE, JAY
Address	2001 62ND AVE.S.
City-State-Zip:	ST.PETERSBURG FL 32712

Title	D
Name	WATSON, GODFREY
Address	1549 84TH AVE.N.
City-State-Zip:	ST.PETERSBURG FL 33702

Title	TD
Name	VOLPE, JENNIFER
Address	13715 GULF BLVD.
City-State-Zip:	MADERIA BEACH FL 33708

Title	SD
Name	CARTER, FAY
Address	2029 BONITA WAY SOUTH
City-State-Zip:	ST. PETERSBURG FL 33712

*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: GODFREY WATSON****BOARD MEMBER  
DIRECTOR****04/26/2017**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date