

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19000004959

Entity Name: YOUNG MEN OF DISTINCTION INC**Current Principal Place of Business:**2201 AVENUE F
RIVIERA BEACH, FL 33404**Current Mailing Address:**P.O. BOX 19494
WEST PALM BEACH, FL 33416 US**FEI Number: 84-1747227****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JEUDY, JENNIFER
4182 SUSSEX AVENUE
PALM SPRINGS, FL 33461 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	TREASURER
Name	JEUDY, JENNIFER
Address	P.O. BOX 19494
City-State-Zip:	WEST PALM BEACH FL 33416

Title	SEC
Name	CAMERON, BRIDGETTE
Address	2201 AVENUE F
City-State-Zip:	RIVIERA BEACH FL 33404

Title	CEO, CHAIRMAN, PRESIDENT, DIRECTOR
Name	WATERS, JACOBY
Address	P.O. BOX 19494
City-State-Zip:	WEST PALM BEACH FL 33416

Title	OTHER
Name	CLAYTON, BEVERLY
Address	P.O. BOX 19494
City-State-Zip:	WEST PALM BEACH FL 33416

Title	DIRECTOR
Name	CAMERON, DAMONE
Address	2201 AVENUE F
City-State-Zip:	RIVIERA BEACH FL 33404

Title	DIRECTOR
Name	SIMMONS, JOE
Address	P.O. BOX 19494
City-State-Zip:	WEST PALM BEACH FL 33416

Title	DIR
Name	KEYS, CHARLES
Address	P.O. BOX 19494
City-State-Zip:	WEST PALM BEACH FL 33416

Title	DIRECTOR
Name	GARY, JONATHAN
Address	P.O. BOX 19494
City-State-Zip:	WEST PALM BEACH FL 33416

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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: JACOBY WATERS**FOUNDER & EXECUTIVE 03/16/2022
DIRECTOR**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name WILLIAMS, KETREENA
Address P.O. BOX 19494
City-State-Zip: WEST PALM BEACH FL 33416

Title VP
Name GILBERT, SONIA
Address P.O. BOX 19494
City-State-Zip: WEST PALM BEACH FL 33416