

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 27, 2006 8:00 am
Secretary of State

02-27-2006 90072 014 ****61.25

DOCUMENT # 729283
 1. Entity Name
 YOUNG MEN'S CHRISTIAN ASSOCIATION OF NORTHWEST FLORIDA, INC.



Principal Place of Business
 400 NORTH PALAFOX STREET
 PENSACOLA, FL 32501

Mailing Address
 400 NORTH PALAFOX STREET
 PENSACOLA, FL 32501

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01232006 No Chg-NP CR2E037 (11/05)

4. FEI Number 59-0624465	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 VOGELSANG, LARRY
 400 NORTH PALAFOX STREET
 PENSACOLA, FL 32501

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: LARRY VOGELSANG, EXEC. DIR. DATE: 1/24/06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC PHILLIPS, PHIL 1008 E. GONZOLEZ PENSACOLA, FL 32503
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C RITCHIE, BUZZ 316 S BAYLEN #200 PENSACOLA, FL 32501
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DC DANIEL, JOHN 2040 UTICA PENSACOLA, FL 32503
TITLE NAME STREET ADDRESS CITY-ST-ZIP	M VOGELSANG, LARRY 410 N. PALAFOX PENSACOLA, FL 32501
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HESS, DON 585 WINDROSE PENSACOLA, FL 32507
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD TOM OWENS 1901 E. GARDEN ST PENSACOLA, FL 32501

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Larry Vogelsang DATE: 1/24/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone # (950) 438-4406