

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007120

FILED  
Apr 27, 2005  
Secretary of State

**Entity Name:** CONCERNED CITIZENS FOR THE YOUTH OF OUR COMMUNITY, INC.

**Current Principal Place of Business:**

111 NW 40TH TERR  
DELRAY BEACH, FL 33445

**New Principal Place of Business:**

**Current Mailing Address:**

111 NW 40TH TERR  
DELRAY BEACH, FL 33445

**New Mailing Address:**

FEI Number: 65-1049972      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

STEFFEY, JOYCEBIN  
111 NW 40TH TERR  
DELRAY BEACH, FL 33445      US

**Name and Address of New Registered Agent:**

STEFFEY, JOYCELYN  
111 NW 40TH TERR  
DELRAY BEACH, FL 33445      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: JOYCELYN STEFFEY

04/27/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD      ( ) Delete  
Name: ECKLER, JAMES F  
Address: 2710 SW 5TH ST  
City-St-Zip: BOYNTON BEACH, FL 33435

Title: PD      ( ) Delete  
Name: ECKLER, JAMES F  
Address: 18383 172ND PLACE  
City-St-Zip: LIVE OAK, FL 32060

Title: STD      ( ) Delete  
Name: BUZEN, KRISTINA  
Address: 93 CUYAHOGA RD  
City-St-Zip: LAKE WORTH, FL 33467

Title: D      ( ) Delete  
Name: COMINSKY, MICHAEL  
Address: 555 ENFIELD RD.  
City-St-Zip: DELRAY BEACH, FL 33444

Title: D      ( ) Delete  
Name: STEFFEY, JOYCELYN  
Address: 111 NW 40TH TERR  
City-St-Zip: DELRAY BEACH, FL 33445

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: KRISTINA E. BUZEN

STD

04/27/2005

Electronic Signature of Signing Officer or Director

Date