

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006402

FILED
Mar 28, 2007
Secretary of State

Entity Name: GIRLS AND BOYS TOWN OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

37 ALAFAYA WOODS BLVD
OVIEDO, FL 32765

New Principal Place of Business:

Current Mailing Address:

37 ALAFAYA WOODS BLVD
OVIEDO, FL 32765

New Mailing Address:

FEI Number: 20-0654235 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GREY, TONY
Address: 2281 LEE ROAD, SUITE 105
City-St-Zip: WINTER PARK, FL 32789

Title: D () Delete
Name: EXECUTIVE DIRECTOR,, GIRLS AND BOYS TOWN
Address: 37 ALAFAYA WOODS BLVD.
City-St-Zip: OVIEDO, FL 32765

Title: D () Delete
Name: COLADO, GUY
Address: 401 N. INTERLACHEN AVE.
City-St-Zip: WINTER PARK, FL 32789

Title: T () Delete
Name: CATHY, MELENDEZ
Address: 37 ALAFAYA WOODS BLVD.
City-St-Zip: OVIEDO, FL 32765

Title: S () Delete
Name: WILDING, ERNIE
Address: 1250 N. PARK AVE.
City-St-Zip: WINTER PARK, FL 32789

Title: D () Delete
Name: DEMETREE, SARAH
Address: 3221 ARDSLEY DRIVE
City-St-Zip: ORLANDO, FL 32804

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: ED (X) Change () Addition
Name: ZYBLET, GREGORY
Address: 37 ALAFAYA WOODS BLVD.
City-St-Zip: OVIEDO, FL 32765

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

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

Title: D (X) Change () Addition
Name: ALLEN, ROBERT
Address: 321 MAGNOLIA AVE
City-St-Zip: MERRITT ISLAND, FL 32954

Title: D (X) Change () Addition
Name: DRAGO, CHARLES
Address: 400 ALEXANDRIA BLVD
City-St-Zip: OVIEDO, FL 32765

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: JUDY F. RASMUSSEN (FFBH)

CFO

03/28/2007

Electronic Signature of Signing Officer or Director

_____ Date