


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 03, 2005 8:00 am
Secretary of State

02-03-2005 90037 011 ****61.25

DOCUMENT # N20113

1. Entity Name
 YOUTH GUIDANCE DONATION FUND OF INDIAN RIVER COUNTY, INC.



Principal Place of Business
 C/O RITA DION
 1028 20TH PLACE
 VERO BEACH, FL 32961

Mailing Address
 PO BOX 121
 C/O RITA DION
 VERO BEACH, FL 32961



2. Principal Place of Business
 Suite, Apt. #, etc.
 City & State
 Zip Country

3. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip Country

01042005 Chg-NP CR2E037 (10/03)

4. FEI Number
 65-0017325 Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 MCDONOUGH, WAYNE R, ESQ
 SALIBA & MCDONOUGH, PA
 1901 25TH STREET
 VERO BEACH, FL 32960

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City FL Zip Code

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reconstituting)

Filing Fee is \$61.25 Due by May 1, 2005

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

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE D Delete <input type="checkbox"/>	DION, RITA 1028 N A1A, APT. C-26 INDIAN RIVER SHORES, FL	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE VP Delete <input type="checkbox"/>	SEXTON, CHRIS 8005 37TH STREET VERO BEACH, FL 32966	TITLE Director <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE D Delete <input type="checkbox"/>	WYKOFF, LAURIE 1170 6TH AVE 1A VERO BEACH, FL 32960	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE P Delete <input type="checkbox"/>	DION, MICHELLE PO BOX 4101 VERO BEACH, FL 32964	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE S - Kathy Collins Delete <input type="checkbox"/>	SOLARI, JACKIE 730 PAINTED BUNTING LANE VERO BEACH, FL 32963	TITLE Secretary Kathy Collins 341 Westwind Ct Vero Beach, FL 32963 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE VP Delete <input type="checkbox"/>	BARTH, PHIL 376 EUGENIA RD VERO BEACH, FL 32963	TITLE VP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	

12. I hereby certify that the information supplied with this filing does not qualify 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 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: *Rita Dion* 1/28/05 772-710-5040
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #