

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jun 04, 2003 8:00 am
Secretary of State

06-04-2003 90095 050 ****61.25

DOCUMENT # N97000004223

1. Entity Name
BOYS & GIRLS CLUB OF HIGHLANDS COUNTY, INC.

Principal Place of Business: **2221 U.S. 27 SOUTH SEBRING FL 33870**
Mailing Address: **2221 U.S. 27 SOUTH SEBRING FL 33870**

2. Principal Place of Business: **111 N. Highlands Ave.**
3. Mailing Address: Suite, Apt. #, etc.

City & State: **Sebring, FL**
City & State: **Sebring, FL**

4. FEI Number: **59-3468588**
Applied For: Not Applicable

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

6. Name and Address of Current Registered Agent:
**GOSSETT, GARY R JR
2221 U.S. 27 SOUTH
SEBRING FL 33870**

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



CHECK HERE IF MAKING CHANGES

5 **FILE NOW: FEE IS \$61.25**

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: P NAME: WALTERS, ALVIN SR. STREET ADDRESS: 2221 U.S. 27 SOUTH CITY-ST-ZIP: SEBRING FL 33870	<input checked="" type="checkbox"/> Delete	TITLE: P NAME: Hilton, Forrest STREET ADDRESS: 2221 U.S. 27 South CITY-ST-ZIP: Sebring, FL 33870	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: T NAME: HILTON, FORREST STREET ADDRESS: 2221 U.S. 27 SOUTH CITY-ST-ZIP: SEBRING FL 33870	<input type="checkbox"/> Delete	TITLE: S NAME: Dixon, William STREET ADDRESS: 2221 U.S. 27 South CITY-ST-ZIP: Sebring, FL 33870	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE: VP NAME: SHANNON, ROBERT STREET ADDRESS: 2221 U.S. 27 SOUTH CITY-ST-ZIP: SEBRING FL 33870	<input type="checkbox"/> Delete	TITLE: T NAME: Sawyer, Shelby STREET ADDRESS: 2221 U.S. 27 South CITY-ST-ZIP: Sebring, FL 33870	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE: VP NAME: DOTY, KIP STREET ADDRESS: 2221 U.S. 27 SOUTH CITY-ST-ZIP: SEBRING FL 33870	<input type="checkbox"/> Delete	TITLE: D NAME: McCelland, Tina STREET ADDRESS: 2221 U.S. 27 South CITY-ST-ZIP: Sebring, FL 33870	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE: D NAME: CARUSO, JOHN STREET ADDRESS: 2221 U.S. 27 SOUTH CITY-ST-ZIP: SEBRING FL 33870	<input checked="" type="checkbox"/> Delete	TITLE: D NAME: Orr, Jason STREET ADDRESS: 2221 U.S. 27 South CITY-ST-ZIP: Sebring, FL 33870	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE: D NAME: WHITE, LAURA STREET ADDRESS: 2221 U.S. 27 SOUTH CITY-ST-ZIP: SEBRING FL 33870	<input checked="" type="checkbox"/> Delete	TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	<input 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: Robert A. Murphy 5-29-03 (863) 385-9652

CR2E037 (10/02)