

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 18, 2004  
Secretary of State**

DOCUMENT# N97000005426

Entity Name: YOUTH FOR CHRIST/HIGHLANDS COUNTY, INC.

**Current Principal Place of Business:**

2559 US 27 SOUTH  
SEBRING, FL 33870

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1526  
SEBRING, FL 33871 US

**New Mailing Address:**

FEI Number: 65-0784096      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

KATSANIS, ANDREW T  
1518 SPRING LANE  
LAKE PLACID, FL 33852

**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: TAYLOR, HOLLY  
Address: 4611 BUNKER DRIVE  
City-St-Zip: SEBRING, FL 33872

Title: TD ( ) Delete  
Name: JENSEN, DARRELL  
Address: 48 LAKE HENRY DRIVE  
City-St-Zip: LAKE PLACID, FL 33852

Title: CD ( ) Delete  
Name: MCINTYRE, RAYMOND  
Address: 123 O'BERRY TRAIL  
City-St-Zip: SEBRING, FL 33875

Title: D ( ) Delete  
Name: SNIVELY, JEANNIE  
Address: 244 HUNTLEY OAKS BLVD  
City-St-Zip: LAKE PLACID, FL 33852

Title: D ( ) Delete  
Name: OTTERMAN, TERRI  
Address: 1125 US HWY. 27 SOUTH  
City-St-Zip: SEBRING, FL 33870

Title: D ( ) Delete  
Name: JENSEN, LYNN  
Address: 48 LAKE HENRY DRIVE  
City-St-Zip: LAKE PLACID, FL 33852

**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:

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: RAYMOND MCINTYRE

CD

01/18/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date