2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005426

FILED Feb 22, 2005 Secretary of State

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

Current Principal Place of Business: New Principal Place of Business:

2559 US 27 SOUTH 1125 US 27 SOUTH SEBRING, FL 33870 SEBRING, FL 33870

Current Mailing Address: New Mailing Address:

P.O. BOX 1526

SEBRING, FL 33871 US

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

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

KATSANIS, ANDREW T 1518 SPRING LANE

LAKE PLACID, FL 33852 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition TAYLOR, HOLLY TAYLOR, HOLLY Name: Name:

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

Title: () Delete Title: () Change () Addition

JENSEN, DARRELL Name: Name: Address: 48 LAKE HENRY DRIVE Address: City-St-Zip: LAKE PLACID, FL 33852 City-St-Zip:

Title: () Delete Title: (X) Change () Addition

MCINTYRE, RAYMOND GRUBB, DALE Name: Name: 123 O'BERRY TRAIL 3715 CREEKSIDE DRIVE Address: Address:

City-St-Zip: SEBRING, FL 33875 City-St-Zip: SEBRING, FL 33875

Title: () Delete Title: () Change () Addition

Name: SNIVELY, JEANNIE Name: 244 HUNTLEY OAKS BLVD Address: Address: City-St-Zip: LAKE PLACID, FL 33852 City-St-Zip:

Title: () Delete Title: (X) Change () Addition

OTTERMAN, TERRI OTTERMAN, TERRI Name: Name: 1125 US HWY. 27 SOUTH 1220 NW LAKEVIEW DRIVE Address: Address: City-St-Zip: SEBRING, FL 33870 City-St-Zip: SEBRING, FL 33870

Title: () Delete Title: () Change () Addition

JENSEN. LYNN Name: Name: Address: 48 LAKE HENRY DRIVE Address: LAKE PLACID, FL 33852 City-St-Zip: 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: HOLLY TAYLOR CD 02/22/2005