

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 17, 2007
Secretary of State**

DOCUMENT# N97000005426

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

Current Principal Place of Business:

1125 US 27 SOUTH
SEBRING, FL 33870

New Principal Place of Business:

1119 US 27 SOUTH
SEBRING, FL 33870

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
3605 WYNSTONE DRIVE
SEBRING, FL 33875 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: CD () 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: D () Delete
Name: GRUBB, DALE
Address: 9205 C.R. 635
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: DEVLIN, ROBERT
Address: 109 BODENHAM ROAD
City-St-Zip: LAKE PLACID, FL 33852

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: TD (X) Change () Addition
Name: GRUBB, DALE
Address: 9205 C.R. 635
City-St-Zip: SEBRING, FL 33875

Title: D (X) Change () Addition
Name: PALMER, PATTY
Address: 885 LAKE LOTELA DRIVE
City-St-Zip: AVON PARK, FL 33825

Title: D (X) Change () Addition
Name: RICHARD, SINCLAIR
Address: 4795 W. JOSEPHINE ROAD
City-St-Zip: LAKE PLACID, FL 33852

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

Title: D (X) Change () Addition
Name: BARBEN, LAURA
Address: 575 LAKE LOTELA DRIVE
City-St-Zip: AVON PARK, FL 33825

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: HOLLY TAYLOR

CD

01/17/2007

Electronic Signature of Signing Officer or Director

Date