

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005426

FILED  
Feb 19, 2009  
Secretary of State

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

## Current Principal Place of Business:

1119 US 27 SOUTH  
SEBRING, FL 33870

## New Principal Place of Business:

107 CIRCLE PARK DRIVE  
SUITE 2  
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: GRUBB, DALE  
Address: 9205 C.R. 635  
City-St-Zip: SEBRING, FL 33875

Title: TD ( ) Delete  
Name: KATSANIS, ANDREW  
Address: 3605 WYNSTONE DRIVE  
City-St-Zip: SEBRING, FL 33875

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

Title: D ( ) Delete  
Name: STEVE, SWAN  
Address: 109 CIRCLE PARK DRIVE  
City-St-Zip: SEBRING, FL 33870

Title: D ( ) Delete  
Name: LESLIE, COPELAND  
Address: 404 NEWMAN ROAD  
City-St-Zip: SEBRING, FL 33876

Title: D ( ) Delete  
Name: GREG, GRIFFIN  
Address: 8 MALLARD 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: SD (X) Change ( ) Addition  
Name: LESLIE, COPELAND  
Address: 404 NEWMAN ROAD  
City-St-Zip: SEBRING, FL 33876

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

I hereby certify that the information supplied with this filing does not qualify 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: DALE GRUBB

CD

02/19/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date