

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

FILED
Mar 19, 2003 8:00 am
Secretary of State

03-19-2003 90407 001 ***472.50

DOCUMENT # N98000001812

1. Entity Name

FLORIDA YOUTH CONSERVATION CORPS, INC.



Principal Place of Business

**36546 THORNHEAVEN LANE
DADE CITY FL 33523**

Mailing Address

**36546 THORNHEAVEN LANE
DADE CITY FL 33523**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **NOT APPLICABLE**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**COLOM, BARTOLOME
36424 FLORRIE MAE LANE
DADE CITY FL 33352-6541**

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

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 NAME	P COLOM, BARTOLOME	<input type="checkbox"/> Delete
STREET ADDRESS	36424 THORNHAVEN LANE	
CITY-ST-ZIP	DADE CITY FL 33523	
TITLE NAME	D COLOM, ROSA	<input type="checkbox"/> Delete
STREET ADDRESS	36424 FLORRIE MAE LANE	
CITY-ST-ZIP	DADE CITY FL 33523	
TITLE NAME	VP SAWYER, NORMA	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	325 JULIA ST.	
CITY-ST-ZIP	KEY WEST FL 33040	
TITLE NAME	D NORTON, BREWDAN	<input type="checkbox"/> Delete
STREET ADDRESS	17320 LINDA VISTA CIRCLE	
CITY-ST-ZIP	LUTZ FL 33549	
TITLE NAME	D COLDM, BARTOLMG	<input type="checkbox"/> Delete
STREET ADDRESS	1000 CUT OFF BRANCA	
CITY-ST-ZIP	OVIEDO FL 32765	
TITLE NAME	S FOR BLACKMAN, TERRY	<input type="checkbox"/> Delete
STREET ADDRESS		
CITY-ST-ZIP		

TITLE NAME	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	36424 FLORRIE MAE LANE
CITY-ST-ZIP	
TITLE NAME	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	36424 FLORRIE MAE LANE
CITY-ST-ZIP	
TITLE NAME	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	D PAULA, JUAN
CITY-ST-ZIP	15873 SW 150 TERRACE
	MIAMI FL 33196
TITLE NAME	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	VP NORTON, BRENDAN
CITY-ST-ZIP	
TITLE NAME	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	DY COLOM, BART JR.
CITY-ST-ZIP	1000 CUT OFF BRANCH
TITLE NAME	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	S BLACKMAN, TERRY
CITY-ST-ZIP	5746 LOMA VISTA DR W
	DAVENPORT FL 33896

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:

REQUIRED

CR2E037 (10/02)

ATTACHMENT

SSO/7886

N98000001812

Florida Youth Conservation Corp, Inc.

Board Members

Bartolome Colom 36424 Florrie Mae Lane Dade City, FL 33523 PRESIDENT	Rosa Colom 36424 Florrie Mae Lane Dade City, FL 33523 DIRECTOR
Brendan Norton 17320 Linda Vista Circle Lutz, FL 33549 VICE PRESIDENT	Aida Norton 17320 Linda Vista Circle Lutz, FL 33549 DIRECTOR
Bart Colom Jr. 1000 Cut Off Branch Oviedo, FL 32765 TREASURER	Lourdes Esparza 36432 Florrie Mae Lane Dade City, FL 33523 DIRECTOR
Juan Paula 15873 SW 150 Terrace Miami, FL 33196 DIRECTOR	Rosa Polanco 15873 SW 150 Terrace Miami, FL 33196 DIRECTOR
Myrna Colom 36546 Thornhaven Lane Dade City FL 33523 DIRECTOR	Terry Blackmon 5746 Loma Vista Dr. W. Davenport, FL 33896 SECRETARY
Daniel Acevedo 8334 Paddlewheel St. Tampa, FL 33637 DIRECTOR	Hector Vasquez 159 Cypress View Lane Groveland, FL 34746 DIRECTOR
Morayma M. Ortiz 159 Cypress View Lane Groveland, FL 34746 DIRECTOR	Brunilda Fowler 1000 Cut Off Branch Oviedo, FL 32765 DIRECTOR