

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 750752

FILED
Apr 17, 2009
Secretary of State

Entity Name: POLK COUNTY YOUTH FAIR, INC.

Current Principal Place of Business:

1702 US HIGHWAY 17 SOUTH
BARTOW, FL 33830

New Principal Place of Business:

Current Mailing Address:

P O BOX 9005 DRAWER HS03
BARTOW, FL 338319005 US

New Mailing Address:

FEI Number: 59-1657268

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CROWELL, THOMAS
5233 LAKE BUFFUM RD
LAKE WALES, FL 33853 US

Name and Address of New Registered Agent:

BOLDEN, JAMES H JR.
5011 TWIN LAKES LANE
BARTOW, FL 33830 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: JAMES H BOLDEN, JR

04/17/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WETHERINGTON, MARIA
Address: 215 E MAIN STREET
City-St-Zip: BARTOW, FL 33830

Title: S () Delete
Name: SUMNER, GEORGIANN
Address: 395 W TYLER ST.
City-St-Zip: BARTOW, FL 33830

Title: PD () Delete
Name: CROWELL, THOMAS
Address: 5233 LAKE BUFFUM RD
City-St-Zip: LAKE WALES, FL 33853

Title: VD () Delete
Name: BOLDEN, JAMES H
Address: 6100 ABC ROAD
City-St-Zip: LAKE WALES, FL 33853

Title: D () Delete
Name: CONNER, DABNEY L
Address: P.O. BOX 1578
City-St-Zip: BARTOW, FL 33831

Title: T () Delete
Name: GRUBBS, CANDY
Address: 195 W MYRTLE STREET
City-St-Zip: BARTOW, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change () Addition
Name: SUMNER, GEORGIANN
Address: 395 W TYLER ST.
City-St-Zip: BARTOW, FL 33830

Title: PD (X) Change () Addition
Name: BOLDEN, JAMES H JR.
Address: 5011 TWIN LAKES LANE
City-St-Zip: BARTOW, FL 33830

Title: D (X) Change () Addition
Name: BOLDEN, JAMES H
Address: 6100 ABC ROAD
City-St-Zip: LAKE WALES, FL 33853

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

Title: TD (X) Change () Addition
Name: WEBB, WILLIAM P
Address: 832 CHAMBERLAIN LOOP
City-St-Zip: LAKE WALES, FL 33853

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: JAMES H BOLDEN, JR

PD

04/17/2009

Electronic Signature of Signing Officer or Director

Date