

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 732749

Entity Name: YOUNG MEN'S CHRISTIAN ASSOCIATION OF WEST CENTRAL FLORIDA, INC.**FILED**
Jan 12, 2018
Secretary of State
CC0179799562**Current Principal Place of Business:**3620 CLEVELAND HGHTS BLVD
LAKELAND, FL 33803-4963**Current Mailing Address:**3620 CLEVELAND HGHTS BLVD
LAKELAND, FL 33803-4963**FEI Number: 59-1158144****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**EICH, KIRK L.
3620 CLEVELAND HEIGHTS BLVD
LAKELAND, FL 33803 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: KIRK L. EICH****01/12/2018**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	DIRECTOR
Name	DORMAN, BILL
Address	3620 CLEVELAND HEIGHTS BLVD
City-State-Zip:	LAKELAND FL 33803

Title	TREASURER
Name	GREEN, MATT
Address	3620 CLEVELAND HGHTS BLVD
City-State-Zip:	LAKELAND FL 33803-4963

Title	CHAIRMAN
Name	RINCON, GILBERT
Address	3620 CLEVELAND HGHTS BLVD
City-State-Zip:	LAKELAND FL 33803-4963

Title	CEO
Name	EICH, KIRK L.
Address	3620 CLEVELAND HGHTS BLVD
City-State-Zip:	LAKELAND FL 33803-4963

Title	SECRETARY
Name	LEFRANCOIS, BEN
Address	3620 CLEVELAND HGHTS BLVD
City-State-Zip:	LAKELAND FL 33803-4963

Title	DIRECTOR
Name	COOK, KEVIN
Address	3620 CLEVELAND HGHTS BLVD
City-State-Zip:	LAKELAND FL 33803-4963

Title	DIRECTOR
Name	CURRY, DAVE
Address	3620 CLEVELAND HGHTS BLVD
City-State-Zip:	LAKELAND FL 33803-4963

Title	DIRECTOR
Name	DAUGHTREY, KATIE
Address	3620 CLEVELAND HGHTS BLVD
City-State-Zip:	LAKELAND FL 33803-4963

Continues on page 2

I hereby 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 all other like empowered.

SIGNATURE: KIRK L EICH**CEO****01/12/2018**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name HOOKS, HAMILTON
Address 3620 CLEVELAND HGHTS BLVD
City-State-Zip: LAKELAND FL 33803-4963

Title DIRECTOR
Name MILTON, ZENAPHA
Address 3620 CLEVELAND HGHTS BLVD
City-State-Zip: LAKELAND FL 33803-4963

Title DIRECTOR
Name MOTTERN, RICK
Address 3620 CLEVELAND HGHTS BLVD
City-State-Zip: LAKELAND FL 33803-4963

Title DIRECTOR
Name RABIN, GARY
Address 3620 CLEVELAND HGHTS BLVD
City-State-Zip: LAKELAND FL 33803-4963

Title DIRECTOR
Name THOMPSON, ELAINE
Address 3620 CLEVELAND HGHTS BLVD
City-State-Zip: LAKELAND FL 33803-4963

Title DIRECTOR
Name KLINE, WAYNE
Address 3620 CLEVELAND HGHTS BLVD
City-State-Zip: LAKELAND FL 33803-4963

Title DIRECTOR
Name MILLER, J.J.
Address 3620 CLEVELAND HGHTS BLVD
City-State-Zip: LAKELAND FL 33803-4963

Title DIRECTOR
Name OSLER, TIFFANY
Address 3620 CLEVELAND HGHTS BLVD
City-State-Zip: LAKELAND FL 33803-4963

Title DIRECTOR
Name SIDOU, JAMES
Address 3620 CLEVELAND HGHTS BLVD
City-State-Zip: LAKELAND FL 33803-4963

Title DIRECTOR
Name TOADVINE, NICK
Address 3620 CLEVELAND HGHTS BLVD
City-State-Zip: LAKELAND FL 33803-4963