

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 750752

**Entity Name:** POLK COUNTY YOUTH FAIR, INC.**Current Principal Place of Business:**1702 US HIGHWAY 17 SOUTH  
BARTOW, FL 33830**Current Mailing Address:**P O BOX 9005 DRAWER HS03  
BARTOW, FL 33831-9005 US**FEI Number:** 59-1657268**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BOLDEN, JAMES HJR.  
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:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Officer/Director Detail :**

|                 |                     |
|-----------------|---------------------|
| Title           | TD                  |
| Name            | CROWELL, PATRICIA   |
| Address         | 5233 LAKE BUFFUM RD |
| City-State-Zip: | LAKE WALES FL 33859 |

|                 |                      |
|-----------------|----------------------|
| Title           | PD                   |
| Name            | BOLDEN, JAMES HJR.   |
| Address         | 5011 TWIN LAKES LANE |
| City-State-Zip: | BARTOW FL 33830      |

|                 |                  |
|-----------------|------------------|
| Title           | D                |
| Name            | CONNER, DABNEY L |
| Address         | P.O. BOX 1578    |
| City-State-Zip: | BARTOW FL 33831  |

|                 |                   |
|-----------------|-------------------|
| Title           | VD                |
| Name            | SUMNER, GEORGIANN |
| Address         | 395 W TYLER ST.   |
| City-State-Zip: | BARTOW FL 33830   |

|                 |                          |
|-----------------|--------------------------|
| Title           | DIRECTOR                 |
| Name            | NELSON, CHRIS            |
| Address         | P O BOX 9005 DRAWER HS03 |
| City-State-Zip: | BARTOW FL 33831-9005     |

|                 |                      |
|-----------------|----------------------|
| Title           | SD                   |
| Name            | WEBB, WILLIAM P      |
| Address         | 832 CHAMBERLAIN LOOP |
| City-State-Zip: | LAKE WALES FL 33853  |

*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:** GEORGIANN SUMNER

VICE PRESIDENT

04/08/2013

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date