# 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.

DIRECTOR

SIGNATURE: KATHRYN LONG Electronic Signature of Signing Officer/Director Detail

City-State-Zip: PALATKA FL 32177 City-State-Zip: PALATKA FL 32177

# С

SIGNATURE:

	Electronic Signature of Registered Agent		
Officer/Director Detail :			
Title	D	Title	D
Name	BATES, CHARLES B III	Name	LONG, KATHRYN E
Address	3400 CRILL AVE	Address	628 EMMETT STREET
<u>.</u>		0.11 01-12 7.1	

#### 1419 REID STREET

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.

# **Current Mailing Address:**

**PO BOX 977** PALATKA, FL 32178 US

# FEI Number: 82-1261748

# Name and Address of Current Registered Agent:

PALATKA, FL 32177

# 2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

### DOCUMENT# N18000007349

Entity Name: PALATKA YOUNG PROFESSIONALS, INC.

# **Current Principal Place of Business:**

3400 CRILL AVE SUITE 2

DOUGLAS, CHARLES T JR. PALATKA, FL 32177 US

FILED May 07, 2019 Secretary of State 8104237825CC

Date

Certificate of Status Desired: No

05/07/2019 Date