

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20113

Entity Name: YOUTH GUIDANCE DONATION FUND OF INDIAN RIVER COUNTY, INC.

FILED
Jan 08, 2019
Secretary of State
1587804793CC

Current Principal Place of Business:

1028 20TH PLACE
VERO BEACH, FL 32960

Current Mailing Address:

1028 20TH PLACE
VERO BEACH, FL 32960 US

FEI Number: 65-0017325

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CRUZ, FELIX L
1028 20TH PLACE
VERO BEACH, FL 32960 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: FELIX L CRUZ

01/08/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SECRETARY
Name KROH, ANNE
Address 132 DEVONWOOD WAY
City-State-Zip: VERO BEACH FL 32963

Title EXECUTIVE DIRECTOR
Name CRUZ, FELIX L
Address 1028 20TH PLACE
City-State-Zip: VERO BEACH FL 32960

Title CHAIR
Name PRADO, KIM
Address 1450 U.S. HWY. 1
City-State-Zip: VERO BEACH FL 32960

Title BOARD MEMBER
Name CONNELLY, LAURIE
Address 3010 NASSAU DRIVE
City-State-Zip: VERO BEACH FL 32960

Title BOARD MEMBER
Name MCSWEENEY, JIM
Address 3184 ASTOR AVE.
City-State-Zip: VERO BEACH FL 32966

Title BOARD TREASURER
Name GRAHAM, PATRICK
Address 2800 OCEAN DRIVE
City-State-Zip: VERO BEACH FL 32963

Title VC
Name MILLER, GREG
Address 1640 CHERRYSTONE WAY
City-State-Zip: VERO BEACH FL 32963

Title DIRECTOR
Name BOGGS, JAMES
Address 9420 87TH STREET
City-State-Zip: VERO BEACH FL 32967

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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: FELIX L CRUZ

EXECUTIVE DIRECTOR

01/08/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name MALCOLM, NADIA
Address 1097 NORMANDIE WAY
City-State-Zip: VERO BEACH FL 32960