

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

DOCUMENT# N97000005426

**FILED**  
**Feb 14, 2013**  
**Secretary of State**  
**CC1072075565**

**Entity Name:** YOUTH FOR CHRIST/HIGHLANDS COUNTY, INC.

**Current Principal Place of Business:**

225 MICCO AVENUE  
SEBRING, FL 33870

**Current Mailing Address:**

P.O. BOX 1526  
SEBRING, FL 33871 US

**FEI Number: 65-0784096**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

GRIFFIN, GREGORY W  
9134 CR 635  
SEBRING, FL 33875 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 CD  
Name WIRICK, DARRYL  
Address 808 APTHORP AVENUE  
City-State-Zip: LAKE PLACID FL 33852

Title TD  
Name GRUBB, DALE  
Address 9205 C.R. 635  
City-State-Zip: SEBRING FL 33875

Title D  
Name LEMLER, DOUG  
Address 409 S. CHRISTY JO DRIVE  
City-State-Zip: AVON PARK FL 33825

Title D  
Name STEPHENS, DAVID  
Address 6044 STRAFFORD OAKS DRIVE  
City-State-Zip: SEBRING FL 33875

Title SD  
Name COPELAND, LESLIE  
Address 404 NEWMAN ROAD  
City-State-Zip: SEBRING FL 33876

Title ED  
Name GRIFFIN, GREGORY W  
Address 9134 CR 635  
City-State-Zip: SEBRING FL 33875

Title DIRECTOR  
Name NELSON, BRENDA  
Address PO BOX 193  
City-State-Zip: SEBRING FL 33871

Title DIRECTOR  
Name BINNS, GARY  
Address 909 ALPINE TERRACE  
City-State-Zip: SEBRING FL 33870

**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: GREGORY W. GRIFFIN**

**EXECUTIVE DIRECTOR**

**02/14/2013**

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

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title           DIRECTOR  
Name           PATTERSON, TODD  
Address        9509 WISPY WOODS DRIVE  
City-State-Zip: SEBRING FL 33875