2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005426

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

FILED Feb 08, 2019 **Secretary of State** 9900239886CC

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:

TAYLOR, TAYNA Y 225 MICCO AVENUE SEBRING, FL 33870 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: TAYNA Y TAYLOR 02/08/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title DIRECTOR Title DIRECTOR

GRUBB, DALE SHANNON, GWENDOLYN Name Name

P.O. BOX 1526 Address P.O. BOX 1526 Address

City-State-Zip: SEBRING FL 33871 SEBRING FL 33871 City-State-Zip:

Title DIRECTOR Title DIRECTOR, SECRETARY

Name PATTERSON, TODD Name NELSON, BRENDA Address P.O. BOX 1526 Address P.O. BOX 1526 SEBRING FL 33871 City-State-Zip: City-State-Zip: SEBRING FL 33871

Title DIRECTOR Title ED

Name HOLLYWOOD, AMANDA Name TAYLOR, TAYNA Y

Address P.O. BOX 1526 P.O. BOX 1526 Address

City-State-Zip: SEBRING FL 33871 City-State-Zip: SEBRING FL 33871

Title DIRECTOR Title DIRECTOR

LONGSHORE, BRENDA Name HENSLEY, DARRELL Name

P.O. BOX 1526 Address Address P.O. BOX 1526 City-State-Zip: SEBRING FL 33871

SEBRING FL 33871 City-State-Zip:

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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.

02/08/2019 SIGNATURE: TAYNA Y. TAYLOR EXECUTIVE DIRECTOR

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name SMITH, AMY Name RUSSELL, MELISSA

Address P.O. BOX 1526 Address P.O. BOX 1526

City-State-Zip: SEBRING FL 33871 City-State-Zip: SEBRING FL 33871