DOCUMENT# 828890	
Entity Name: YOUNG LIFE, INC.	
Current Principal Place of Business:	

2015 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

420 N. CASCADE COLORADO SPRINGS, CO 80903

Current Mailing Address:

P.O. BOX 520 COLORADO SPRINGS, CO 80901 US

FEI Number: 84-0385934

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 US Certificate of Status Desired: No

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

Officer/Director Detail :

Title	CFO	Title	D
Name	KOERNER, CYNTHIA	Name	EATON, CAROL
Address	420 N CASCADE	Address	420 N CASCADE
City-State-Zip:	COLORADO SPRINGS CO 80903	City-State-Zip:	COLORADO SPRINGS CO 80903
Title	PCEO	Title	TREA
Name	RYDBERG, DENNIS I.	Name	BRIGGS, DAVID
Address	420 N. CASCADE	Address	420 N CASCADE
City-State-Zip:	COLORADO SPRINGS CO 80903	City-State-Zip:	COLORADO SPRINGS CO 80903
Title	SECR	Title	DIRECTOR
Title Name	SECR SHERRILL, PAUL	Title Name	DIRECTOR COLANGELO, JERRY
Name	SHERRILL, PAUL	Name	COLANGELO, JERRY P.O. BOX 520
Name Address	SHERRILL, PAUL 420 N CASCADE	Name Address	COLANGELO, JERRY P.O. BOX 520
Name Address City-State-Zip:	SHERRILL, PAUL 420 N CASCADE COLORADO SPRINGS CO 80903	Name Address	COLANGELO, JERRY P.O. BOX 520
Name Address City-State-Zip: Title	SHERRILL, PAUL 420 N CASCADE COLORADO SPRINGS CO 80903 COO	Name Address	COLANGELO, JERRY P.O. BOX 520

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: DAVID BRIGGS

TREASURER

03/04/2015

Date

Electronic Signature of Signing Officer/Director Detail

Date