

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 701238

FILED
Jan 20, 2009
Secretary of State

Entity Name: BOYS & GIRLS CLUBS OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

801 NORTH MAGNOLIA AVENUE
SUITE 305
ORLANDO, FL 32803 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2987
ORLANDO, FL 32802 US

New Mailing Address:

FEI Number: 59-0951887

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAIN, GARY W.
801 NORTH MAGNOLIA AVE.
#305
ORLANDO, FL 32803 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: SHAMLEY, MARK
Address: 8701 MAITLAND SUMMIT BLVD.
City-St-Zip: ORLANDO, FL 32810

Title: VD () Delete
Name: KALTBAUM, GARY
Address: 201 S. ORANGE AVE., SUITE 1017
City-St-Zip: ORLANDO, FL 32801

Title: CD () Delete
Name: HATCHER, MARION III
Address: 720 RUGBY ST., SUITE 100
City-St-Zip: ORLANDO, FL 32804

Title: TD () Delete
Name: UTSEY, ROBERT
Address: 60 NORTH COURT AVE
City-St-Zip: ORLANDO, FL 32801

Title: P () Delete
Name: CAIN, GARY W
Address: 801 N. MAGNOLIA AVENUE, SUITE 305
City-St-Zip: ORLANDO, FL 32803

Title: VD () Delete
Name: RUOFF, STEVE
Address: 2200 LUCIEN WAY SUITE 350
City-St-Zip: MAITLAND, FL 32751

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: CD (X) Change () Addition
Name: KALTBAUM, GARY
Address: 201 S. ORANGE AVE., SUITE 1017
City-St-Zip: ORLANDO, FL 32801

Title: TR (X) Change () Addition
Name: CIESLAK, RICHARD
Address: 1260 MCNIEL WOODS PLACE
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: VD (X) Change () Addition
Name: UTSEY, ROBERT
Address: 60 NORTH COURT AVE
City-St-Zip: ORLANDO, FL 32801

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: GARY W. CAIN

P

01/20/2009

Electronic Signature of Signing Officer or Director

Date