2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 25, 2003
Secretary of State

DOCUMENT# 707184

Entity Name: THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF FLORIDA'S FIRST COAST, INC.

Current Principal Place of Business:

5100 BELFORT ROAD
JACKSONVILLE, FL 32256

New Principal Place of Business:

Current Mailing Address:

5100 BELFORT ROAD
JACKSONVILLE, FL 32256

New Mailing Address:

FEI Number: 59-0638514 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

ZUBER, PENNY
5100 BELFORT ROAD
JACKSONVILLE, FL 32256 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:	CD	( ) Delete
Name:	AIKENS, CHESTER A DR.	
Address:	305 E UNION ST	
City-St-Zip:	JACKSONVILLE, FL	
Title:	TD	( ) Delete
Name:	ROBERTS, DON D. D	
Address:	5220 BELFORT ROAD	
City-St-Zip:	JACKSONVILLE, FL 32256	
Title:	P	( ) Delete
Name:	WILKES, THOMAS W	
Address:	148 CROSSCOVE CIRCLE	
City-St-Zip:	PONTE VEDRA BEACH, FL 32082	
Title:	CD	( ) Delete
Name:	CANNON, CARL N	
Address:	100 RIVERSIDE AVE	
City-St-Zip:	JACKSONVILLE, FL 32202	
Title:	VP	( ) Delete
Name:	ZUBER, PENELOPE D	
Address:	221 RIVERSIDE AVE	
City-St-Zip:	JACKSONVILLE, FL 32202	
Title:	S/D	( ) Delete
Name:	THOMPSON, JOSEPH F	
Address:	5220 BELFORT ROAD	
City-St-Zip:	JACKSONVILLE, FL 32256	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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 for the exemption stated in Section 119.07(3)(i), 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: PENELOPE D. ZUBER VP 08/25/2003
Electronic Signature of Signing Officer or Director — Date