

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Martham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **707570**

(8)

1. Corporation Name
**THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF BREVARD
COUNTY FLORIDA, INC.**

Principal Place of Business

Mailing Address

**2100 S. PARK AVE.
TITUSVILLE FL 32780**

**2100 S. PARK AVE.
TITUSVILLE FL 32780-4572**



3. Date Incorporated or Qualified 07/13/1964	3a. Date of Last Report 01/31/1996
4. FEI Number 59-0033511	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**DEAN, KEVIN
2100 S. PARK AVE.
TITUSVILLE FL 32780**

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City FL
85	Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ Signature, typed or printed name of registered agent and title, if applicable (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE PD	NAME FISHER, ROBIN	<input type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 1625 GARDEN ST.	CITY-ST-ZIP TITUSVILLE FL			
TITLE VD	NAME JORDAN, ROBERT	<input type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 1750 LAKESIDE DR.	CITY-ST-ZIP TITUSVILLE FL			
TITLE D	NAME CARMONA, DR. PEDRO	<input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 1110 RIVERSIDE DRIVE	CITY-ST-ZIP TITUSVILLE FL			
TITLE STD	NAME BOGGS, ALAN	<input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 905 CHENEY HIGHWAY	CITY-ST-ZIP TITUSVILLE FL			
TITLE D	NAME DENSON, DR. TODD	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 2191 GARDEN STREET	CITY-ST-ZIP TITUSVILLE FL			
TITLE D	NAME SHAHEEN CINDY	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 2175 VISTA TERR	CITY-ST-ZIP TITUSVILLE FL			

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

PROVIDED

SIGNATURE AND TYPEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-6-97

407-367-8934

Daytime Phone # 0015008

CR2E037 (9/96)