

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 709089

FILED
Mar 18, 2009
Secretary of State

Entity Name: PALMETTO YOUTH CENTER

Current Principal Place of Business:

501 17TH STREET WEST
P.O. BOX 608
PALMETTO, FL 34220

New Principal Place of Business:

501 17TH STREET WEST
PALMETTO, FL 34221

Current Mailing Address:

501 17TH STREET WEST
P.O. BOX 608
PALMETTO, FL 34220

New Mailing Address:

P.O. BOX 608
PALMETTO, FL 34220

FEI Number: 59-1090377

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HOUSTON, GLADYS S
1610 8TH AVE WEST
PALMETTO, FL 34221 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: D () Delete
Name: TILLIS, THEODORE
Address: 3101-9TH AVE. DR. E.
City-St-Zip: PALMETTO, FL 34221

Title: T () Delete
Name: CRADDOCK, FRANKIE
Address: 25049 8TH AVE EAST
City-St-Zip: PALMETTO, FL 34221

Title: P () Delete
Name: HOUSTON, GLADYS M
Address: P.O. BOX 52
City-St-Zip: PALMETTO, FL 34220

Title: S () Delete
Name: JOHNSON, PATRICIA
Address: 4498 SANIBEL WAY
City-St-Zip: BRADENTON, FL 34203

Title: D () Delete
Name: SHANNON, EDDIE,
Address: 216 18TH ST E.
City-St-Zip: PALMETTO, FL 34221

Title: D () Delete
Name: COVINGTON, LILLIE M.,
Address: 3104 9 AVE DR E
City-St-Zip: PALMETTO, FL 34221

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 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: GLADYS S. HOUSTON

P

03/18/2009

Electronic Signature of Signing Officer or Director

Date