

5-12-98 B 7083 -C
FILE NOW: FILING FEE IS \$61.25

FILED
May 12 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 711792 (2)
 1. Corporation Name
YMCA OF ST. LUCIE COUNTY, INC.



Principal Place of Business 903 SOUTH 21ST STREET FT PIERCE FL 34950-4863	Mailing Address 903 SOUTH 21ST STREET FT PIERCE FL 34950-4863
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3. Date Incorporated or Qualified 11/10/1966	
4. FEI Number 59-0912551	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
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Zip 29	Country 30

9. Name and Address of Current Registered Agent

HOUGHTELIN, CHERYL
903 S. 21ST ST.
FT. PIERCE FL 34950

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	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: *Cheryl A. Houghtelin* DATE: **4/29/98**

12. OFFICERS AND DIRECTORS

TITLE	D <input checked="" type="checkbox"/> DELETE
NAME	GONANO, MELINDA
STREET ADDRESS	8640 NW M'CARI LANE
CITY-ST-ZIP	JENSEN BEACH FL 34957
TITLE	D <input type="checkbox"/> DELETE
NAME	HAWLEY, CRAIG
STREET ADDRESS	8480 IMMOKOLEE RD.
CITY-ST-ZIP	FT. PIERCE FL 34951
TITLE	D <input type="checkbox"/> DELETE
NAME	SIPLIN, THOMAS
STREET ADDRESS	2211 OKEECHOBEE RD.
CITY-ST-ZIP	FT. PIERCE FL 34950
TITLE	D <input type="checkbox"/> DELETE
NAME	HOUGHTELIN, CHERYL
STREET ADDRESS	903 SOUTH 21ST STREET
CITY-ST-ZIP	FT PIERCE FL 34950-4863
TITLE	VP <input type="checkbox"/> DELETE
NAME	BARNES, CLIFF
STREET ADDRESS	1803 S 25TH ST
CITY-ST-ZIP	FT PIERCE RF
TITLE	S <input type="checkbox"/> DELETE
NAME	LUNDY, JAY
STREET ADDRESS	3503 AVE Q
CITY-ST-ZIP	FT PIERCE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I 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.

CHERYL A HOUGHTELIN

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