

# 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 713018

**FILED**  
**Oct 12, 2009**  
**Secretary of State**

**Entity Name:** THE NORTH CENTRAL FLORIDA YMCA (YOUNG MEN'S CHRISTIAN ASSOCIATION), INC.

**Current Principal Place of Business:**

5201 N.W. 34TH STREET  
GAINESVILLE, FL 32605

**New Principal Place of Business:**

**Current Mailing Address:**

9315 SW ARCHER RD  
GAINESVILLE, FL 32608

**New Mailing Address:**

**FEI Number:** 59-1195257

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

PATCH, SHAWN  
5201 NW 34 STREET  
GAINESVILLE, FL 32605 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: SHAWN PATCH

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: WILCOX, DOUG  
Address: 2501 NW 66 COURT  
City-St-Zip: GAINESVILLE, FL 32653

Title: D ( ) Delete  
Name: BROWN, LEVEDA  
Address: 4135 NW 16 DRIVE  
City-St-Zip: GAINESVILLE, FL 3260

Title: V ( ) Delete  
Name: BROWN, DOUG  
Address: 4135 NW 16 DR  
City-St-Zip: GAINESVILLE, FL 32605

Title: D ( ) Delete  
Name: MAHAFFEY, DICK  
Address: 5080 NEWBERRY ROAD  
City-St-Zip: GAINESVILLE, FL 32607

Title: P ( ) Delete  
Name: DOUGHERTY, RUSTY  
Address: 3010 N WALDO ROAD  
City-St-Zip: GAINESVILLE, FL 32607

Title: S ( ) Delete  
Name: DAUN, DICKIE  
Address: 10315 SW 49TH LANE  
City-St-Zip: GAINESVILLE, FL 32608

**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: RUSTY DOUGHERTY

P

10/12/2009

Electronic Signature of Signing Officer or Director

Date