## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#728898** 

FILED Feb 18, 2009 Secretary of State

Entity Name: CENTRAL FLORIDA YOUNG MEN'S CHRISTIAN ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 433 N MILLS AVE. ORLANDO, FL 32803 **Current Mailing Address: New Mailing Address:** 433 N MILLS AVE ORLANDO, FL 32803 FEI Number: 59-0624430 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FERBER, JAMES W MANAHAN, COLLEEN 433 N MILLS AVE. 433 N MILLS AVE. ORLANDO, FL 32803 ORLANDO, FL 32803 US US 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: COLLEEN MANAHAN 02/18/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition FERBER, JAMES W Name: Name: 433 N. MILLS AVE Address: Address: City-St-Zip: ORLANDO, FL 32803 City-St-Zip: Title: Title: (X) Change ( ) Addition ( ) Delete Name: WILCOX, DAN Name: MANAHAN, COLLEEN Address: 433 N. MILLS AVE Address: 433 N. MILLS AVE City-St-Zip: ORLANDO, FL 32803 City-St-Zip: ORLANDO, FL 32803 Title: () Delete Title: CFO (X) Change ( ) Addition RUSSELL, MARK RUSSELL, MARK Name: Name: 433 N. MILLS AVE Address: Address: 433 N. MILLS AVE City-St-Zip: ORLANDO, FL 32803 City-St-Zip: ORLANDO, FL 32803 Title: SD () Delete Title: () Change () Addition MARTINEZ, RALPH Name: Name: Address: 433 N. MILLS AVE Address: City-St-Zip: ORLANDO, FL 32803 City-St-Zip: Title: CD () Delete Title: () Change () Addition WEBB, CHIP Name: Name: 433 N MILLS AVE Address: Address: City-St-Zip: ORLANDO, FL 32803 City-St-Zip: Title: () Delete Title: () Change () Addition HOSTETTER, SANDY Name: Name: Address: 433 N. MILLS AVENUE Address: ORLANDO, FL 32803 City-St-Zip: 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: COLLEEN MANAHAN VP 02/18/2009