2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 732749

FILED Jan 09, 2009 Secretary of State

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

Current Principal Place of Business: New Principal Place of Business: 3620 CLEVELAND HGHTS BLVD LAKELAND, FL 338034963 **Current Mailing Address: New Mailing Address:** 3620 CLEVELAND HGHTS BLVD LAKELAND, FL 338034963 FEI Number: 59-1158144 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: COLLINS, ALICE SLACK 3620 CLÉVELAND HEIGHTS BLVD LAKELAND, FL 33803 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BILL, DORMAN Name: Name: 3620 CLEVELAND HEIGHTS BLVD Address: Address: City-St-Zip: LAKELAND, FL 33803 City-St-Zip: Title: () Delete Title: () Change () Addition VINING, GEOFFREY Name: Name: Address: 3620 CLEVELAND HEIGHTS BLVD Address: City-St-Zip: LAKELAND, FL 33803 City-St-Zip: Title: () Delete Title: () Change () Addition ENGLISH, BOB Name: Name: 3620 CLEVELAND HEIGHTS BLVD Address: Address: City-St-Zip: LAKELAND, FL 33803 City-St-Zip: Title: TD () Delete Title: () Change () Addition Name: CROWELL, MICHAEL Name: 3620 CLEVELAND HEIGHTS BLVD Address: Address: City-St-Zip: LAKELAND, FL 33803 City-St-Zip: Title: VCD () Delete Title: () Change () Addition MILTON, ZENAPHA Name: Name: 3620 CLEVELAND HEIGHTS BLVD Address: Address: City-St-Zip: LAKELAND, FL 33803 City-St-Zip: Title: () Delete Title: () Change () Addition ENGLISH, JACK Name: Name: Address: 3620 CLEVELAND HEIGHTS BLVD Address: LAKELAND, FL 33803 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: ALICE SLACK COLLINS CEO 01/09/2009