

**2002 UNIFORM BUSINESS REPORT (UBR)****FILED****Feb 06, 2002 8:00 am**  
**Secretary of State**

02-06-2002 90034 018 \*\*\*\*61.25

**DOCUMENT # 733380**

1. Entity Name

**YOUTH FOR CHRIST/BAY-AREA, INC.**

Principal Place of Business

**2510 S MACDILL AVE  
TAMPA FL 33629  
US**

Mailing Address

**PO BOX 14310  
TAMPA FL 33690  
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

4. FEI Number **59-1610246**

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**WILHOIT, ERNIE L  
2510 S MACDILL AVE  
TAMPA FL 33629**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**9. Election Campaign Financing  
Trust Fund Contribution. ☐**\$5.00** May Be  
Added to Fees**Make Check Payable to  
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**TDC  
KOCH, RON  
13186 LINDEN PLACE DRIVE  
SEMINOLE FL 33776** ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**Tom Edwards  
24230 Landing Drive  
Lutz, FL 33511** ☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
DUNN, DANIEL  
8304 KIRKWOOD DR  
TAMPA FL 33634** ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**Honorable Florence Foster  
Courthouse Annex  
800 E. Kennedy, Room 109, Tampa, FL 33602** ☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VC  
VAN OOTEGHEM, STEVE  
4600 BAY TO BAY BLVD  
TAMPA FL 33629** ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**John W. Jennings, Esq.  
714 Edison Avenue  
Tampa, FL. 33606** ☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**LANOUE, DR. ALCIDE  
3902 S KENWOOD AVENUE  
TAMPA FL 33611-1526** ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**Marc A. Bellas  
25306 Tradewinds Drive  
Land O' Lakes, FL 34639** ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**Joseph Cochran  
6214 Emmons Lane  
Tampa, FL 33647** ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:****Ernie L. Wilhoit**

01/22/02 813/902-8245

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)