## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#733380** 

FILED Jun 30, 2009 Secretary of State

Entity Name: YOUTH FOR CHRIST/BAY-AREA, INC.

	rincipal Place of Business:	New Princ	cipal Place of Business:	
419 EAS AMPA, F	T 4TH AVENUE L 33605 US			
Current N	lailing Address:	New Maili	ing Address:	
PO BOX 5996 FAMPA, FL 33675 US			1419 EAST 4TH AVENUE TAMPA, FL 33605 US	
n accordar	: 59-1610246 FEI Number Applied For() I ce with s. 607.193(2)(b), F.S., the corporation did not re I Address of Current Registered Agent:	· ·		
(OCH, R0 419 EAS AMPA, F	DNALD B T 4TH AVENUE		-	
the Stat	e of Florida.	ose of changing	its registered office of registered agent, or both	
SIGNATU	RE: Electronic Signature of Registered Agent		Date	
OFFICERS AND DIRECTORS:		ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	
itle: lame: ddress: :ity-St-Zip:	TDC () Delete KOCH, RON 13186 LINDEN PLACE DRIVE SEMINOLE, FL 33776	Title: Name: Address: City-St-Zip:	()Change ()Addition	
tle:	M () Delete BACKMAN, BILL	Title: Name:	( ) Change ( ) Addition	
ddress:	3221 W. MARLIN AVE TAMPA, FL 33611	Address: City-St-Zip:		
ddress: ty-St-Zip: tle: ame: ddress:	3221 W. MARLIN AVE	Address:	D (X) Change ( ) Addition CAMERON, CAROL 3316 SAN MIGUEL TAMPA, FL 33629	
ddress: ity-St-Zip: ttle: ame: ddress: ity-St-Zip: ttle: ame: ddress:	3221 W. MARLIN AVE TAMPA, FL 33611  D () Delete TISON, WILLIAM 2115 WAGDALENE MANOR DR	Address: City-St-Zip: Title: Name: Address:	CAMERON, CAROL 3316 SAN MIGUEL	
ame: ddress: ity-St-Zip: tle: ame: ddress: ity-St-Zip: tle: ame: ddress: ity-St-Zip: tle: ame: ddress: ity-St-Zip:	3221 W. MARLIN AVE TAMPA, FL 33611  D ( ) Delete TISON, WILLIAM 2115 WAGDALENE MANOR DR TAMPA, FL 33613  D ( ) Delete CARTER, WAYNE 1203 OXBRIDGE DR	Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	CAMERON, CAROL 3316 SAN MIGUEL TAMPA, FL 33629	

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: WILLIAM BACKMAN D 06/30/2009