

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # F00000001910**

1. Entity Name

YOUTH DEVELOPMENT CORPORATION OF AMERICA**FILED**
Aug 07, 2001 8:00 am
Secretary of State

08-07-2001 90014 001 ****61.25

Principal Place of Business

1720 COUNTY ROAD 60
SOUTH POINT OH 45680

Mailing Address

1720 COUNTY ROAD 60
SOUTH POINT OH 45680

2. Principal Place of Business

1130 County Rd. 18

3. Mailing Address

1130 County Rd. 18

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

South Point, OH

City & State

South Point, OH

4. FEI Number

31-1031962

Applied For

Not Applicable

Zip

45680

Country

Lawrence

Zip

45680

Country

Lawrence5. Certificate of Status Desired ☐ **\$8.75 Additional**
Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

7. Name and Address of New Registered Agent

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**After September 12, 2001, min. will be \$236.25**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

TITLE	P	<input type="checkbox"/> Delete
NAME	LAMBERT, DON	
STREET ADDRESS	2344 COUNTY ROAD 19	
CITY-ST-ZIP	KITTS HILL OH 45645-8523	
TITLE	V	<input type="checkbox"/> Delete
NAME	WILEY, IRELAND	
STREET ADDRESS	16591 ST. RT. 243	
CITY-ST-ZIP	CHESAPEAKE OH 45619	
TITLE	S	<input type="checkbox"/> Delete
NAME	HOWARD, SCOTT	
STREET ADDRESS	3961 MAIN STREET	
CITY-ST-ZIP	PERRY OH 44081-9606	
TITLE	T	<input type="checkbox"/> Delete
NAME	YORK, BUTCH	
STREET ADDRESS	319 BRIDGE STREET	
CITY-ST-ZIP	HUNTINGTON WV 25702	
TITLE	D	<input type="checkbox"/> Delete
NAME	DINGUS, BILL	
STREET ADDRESS	1804 LIBERTY AVENUE	
CITY-ST-ZIP	IRONTON OH 45638	
TITLE	D	<input type="checkbox"/> Delete
NAME	EDWARDS, RANDOLPH	
STREET ADDRESS	1709 CR 5	
CITY-ST-ZIP	KITTS HILL OH 45645	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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: *Donald Lambert*

7-28-01

CR2E037 (5/01)

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