

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000001745

**FILED**  
**Apr 18, 2010**  
**Secretary of State**

**Entity Name:** CRYSTAL BEACH YOUTH CENTER, INCORPORATED

**Current Principal Place of Business:**

520 CRYSTAL BEACH AVE.  
CRYSTAL BEACH, FL 34681

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 434  
CRYSTAL BEACH, FL 34681

**New Mailing Address:**

**FEI Number:** 59-3700550

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

THOMPSON, DENNIS P  
1150 CLEVELAND ST., #301  
CLEARWATER, FL 33755 US

**Name and Address of New Registered Agent:**

WALD, ALICIA V  
124 GEORGIA AVE  
CRYSTAL BEACH, FL 34681 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: ALICIA WALD

04/18/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: S/T  
Name: WALD, ALICIA  
Address: 124 GEORGIA AVE/PO BOX 1136  
City-St-Zip: CRYSTAL BEACH, FL 34681

Title: P  
Name: GREIS, ERIC  
Address: 622 N MAYO ST/PO BOX 169  
City-St-Zip: CRYSTAL BEACH, FL 34681

Title: VP  
Name: THORP, DEANNA  
Address: 609 N MAYO ST  
City-St-Zip: CRYSTAL BEACH, FL 34681

Title: D  
Name: SCOGNAMIGLIO, MICKEY  
Address: 209 S MAYO ST/PO BOX 975  
City-St-Zip: CRYSTAL BEACH, FL 34681

I hereby 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 all other like empowered.

SIGNATURE: ALICIA WALD

S/T

04/18/2010

Electronic Signature of Signing Officer or Director

Date