

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003410

FILED
Aug 08, 2009
Secretary of State

Entity Name: AMERICAN YOUTH ASSOCIATION, INC.

Current Principal Place of Business:

422 N. MAIN ST.
CRESTVIEW, FL 32536

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1486
CRESTVIEW, FL 32536

New Mailing Address:

FEI Number: 59-3721123 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

POWELL, DIXIE D
422 N. MAIN ST.
CRESTVIEW, FL 32536 US

Name and Address of New Registered Agent:

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:

Title: DPV () Delete
Name: GABRIEL, CHARLES F
Address: 2358 SUSAN DR.
City-St-Zip: CRESTVIEW, FL 32536

Title: DST () Delete
Name: CROOKS, APRIL S
Address: 2358 SUSAN DR.
City-St-Zip: CRESTVIEW, FL 32536

Title: D () Delete
Name: SHUMWAY, LARRY R
Address: 8458 LOONEY RD.
City-St-Zip: BAKER, FL 32531

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DST (X) Change () Addition
Name: GABRIEL, ANTHONY M
Address: 2358 SUSAN DR.
City-St-Zip: CRESTVIEW, FL 32536

Title: D (X) Change () Addition
Name: GABRIEL, JOHN P
Address: 951 RIVERVIEW DR
City-St-Zip: TOTOWA, NJ 07512

Title: D () Change (X) Addition
Name: CAPRIA, GIANNINA
Address: 10 MARY AVE
City-St-Zip: WEST PATERSON, NJ 07424

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: CHARLES F GABRIEL

DPV

08/08/2009

Electronic Signature of Signing Officer or Director

Date