

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 04, 2004 8:00 am
Secretary of State

02-04-2004 90049 006 ****70.00

DOCUMENT # N01000005988

1. Entity Name

FLORIDA EDUCATIONAL YOUTH TRAINING CORP. INC.



Principal Place of Business

13123 - 108TH AVE. NORTH
LARGO FL 33774

Mailing Address

13123 - 108TH AVE. NORTH
LARGO FL 33774

2. Principal Place of Business

1611 Ranchette Rd
Suite, Apt. #, etc.
Zephyrhills

3. Mailing Address

1611 Ranchette Rd
Suite, Apt. #, etc.
Zephyrhills, FL

City & State
FL

City & State

Zephyrhills, FL

Zip
35543

Country
USA

Zip
33543

Country
USA

4. FEI Number

59-3740095

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GRIMSLEY, ROBERT F
13123 - 108TH AVE. NORTH
LARGO FL 33774

7. Name and Address of New Registered Agent

Name Robert F. Grimsley

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

1611 Ranchette Rd

City

Zephyrhills

FL

Zip Code

33543

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Robert F. Grimsley

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

(NOTE: Registered Agent signature required when reinstating)

DATE

1-28-04

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD
NAME GRIMSLEY, ROBERT F
STREET ADDRESS 13123 - 108TH AVE. NORTH
CITY-ST-ZIP LARGO FL 33774 ☐ Delete

TITLE VSD
NAME YAKES, MICHAEL J
STREET ADDRESS 2402 53RD ST. SOUTH
CITY-ST-ZIP GULFPORT FL 33707 ☐ Delete

TITLE SD
NAME BOHNING, LEE R
STREET ADDRESS 4721 DEL RIO WAY SOUTH
CITY-ST-ZIP GULFPORT FL 33711 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
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CITY-ST-ZIP ☐ Change ☐ Addition

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NAME
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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: *Robert F. Grimsley* Robert F. Grimsley

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-28-04 727-423-3685