

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 13, 2006 8:00 am**  
**Secretary of State**

02-13-2006 90014 019 \*\*\*\*61.25

**DOCUMENT # N01000008968**

1. Entity Name

GIFFORD YOUTH ACTIVITY CENTER, INC.



Principal Place of Business

4875 43RD AVE.  
VERO BEACH FL 32967

Mailing Address

4875 43RD AVE.  
VERO BEACH FL 32967



2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

43-1950911

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

RUST, GARY M  
1626 90TH AVE.  
VERO BEACH FL 32966

7. Name and Address of New Registered Agent

Name Tomas Rene Perez  
Street Address (P.O. Box Number is not acceptable) 1626 90th Avenue  
City Vero Beach, FL Zip Code 32966

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

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

(NOTE: Registered Agent signature required when registering)

DATE

**FILE NOW: FEE IS \$61.25**

**Due By May 1, 2006**

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 ☐ Delete  
NAME HUDSON, A. RONALD  
STREET ADDRESS 4235 27TH AVE.  
CITY-ST-ZIP VERO BEACH FL 32967

TITLE ☒ Delete  
NAME DT  
NAME RUST, GARY M  
STREET ADDRESS 1626 90TH AVE.  
CITY-ST-ZIP VERO BEACH FL 32966

TITLE ☐ Delete  
NAME D  
NAME HOPKINS, CARTER W  
STREET ADDRESS 1580 GRACEWOOD LN.  
CITY-ST-ZIP VERO BEACH FL 32963

TITLE ☐ Delete  
NAME DC  
NAME DEAN, JOHN H  
STREET ADDRESS 2223-10TH AVENUE  
CITY-ST-ZIP VERO BEACH FL 32960

TITLE ☐ Delete  
NAME DAT  
NAME PEREZ, TOMAS RENE  
STREET ADDRESS 2019 CORTEZ AVENUE  
CITY-ST-ZIP VERO BEACH FL 32960

TITLE ☐ Delete  
NAME DS  
NAME WASHINGTON, KATHERINE  
STREET ADDRESS 1990 25TH ST  
CITY-ST-ZIP VERO BEACH FL 32960

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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

TITLE ☐ Change ☐ Addition  
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CITY-ST-ZIP

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

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 M. L. De la Cruz

1/26/06 1772794-1005