

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008968

FILED  
Jan 29, 2009  
Secretary of State

**Entity Name:** GIFFORD YOUTH ACTIVITY CENTER, INC.

**Current Principal Place of Business:**

4875 43RD AVE.  
VERO BEACH, FL 32967

**New Principal Place of Business:**

**Current Mailing Address:**

4875 43RD AVE.  
VERO BEACH, FL 32967

**New Mailing Address:**

**FEI Number:** 43-1950911

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PEREZ, TOMAS R  
21 ROYAL PALM POINTED - SUITE 201  
VERO BEACH, FL 32960 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: D ( ) Delete  
Name: HUDSON, A. RONALD  
Address: 4235 27TH AVE.  
City-St-Zip: VERO BEACH, FL 32967

Title: DC ( ) Delete  
Name: DEAN, JOHN H  
Address: 2223-10TH AVENUE  
City-St-Zip: VERO BEACH, FL 32960

Title: DT ( ) Delete  
Name: PEREZ, TOMAS R  
Address: 2019 CORTWEZ AVENUE  
City-St-Zip: VERO BEACH, FL 32960

Title: DS ( ) Delete  
Name: WASHINGTON, KATHERINE  
Address: 1990 25TH ST  
City-St-Zip: VERO BEACH, FL 32960

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DC (X) Change ( ) Addition  
Name: POLACKAWICH, ALAN SR.  
Address: 4100 20TH STREET  
City-St-Zip: VERO BEACH, FL 32960

Title: D (X) Change ( ) Addition  
Name: GIPSON, GODFREY  
Address: 4136 57TH COURT  
City-St-Zip: VERO BEACH, FL 32967

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

Title: DS (X) Change ( ) Addition  
Name: MCKINNEY, MARY B  
Address: 5616 41ST STREET  
City-St-Zip: VERO BEACH, FL 32967

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: ANGELIA PERRY

ED

01/29/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date