

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003734

FILED
May 01, 2006
Secretary of State

Entity Name: SOUTHWEST FLORIDA YOUTH FOR CHRIST, INC.

Current Principal Place of Business:

1100 COMMERCIAL BLVD UNIT 119
NAPLES, FL 34104

New Principal Place of Business:

Current Mailing Address:

1100 COMMERCIAL BLVD UNIT 119
NAPLES, FL 34104

New Mailing Address:

FEI Number: 77-0592597 **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:

JUSTICE, JACK T
1100 COMMERCIAL BLVD UNIT 119
NAPLES, FL 34104 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: C () Delete
Name: SAVAGE, TIM
Address: 204 MONTEREY DRIVE
City-St-Zip: NAPLES, FL 34119

Title: S () Delete
Name: SAVAGE, PETE
Address: 6530 BOTTLE BRUSH LANE
City-St-Zip: NAPLES, FL 34105

Title: T () Delete
Name: SAVAGE, JAMIE
Address: 52 GULF COTTAGE DRIVE
City-St-Zip: NAPLES, FL 34104

Title: D () Delete
Name: HODGES, LARRY
Address: 873 CARRICK BEND CIRCLE, #202
City-St-Zip: NAPLES, FL 34110

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: TIM SAVAGE

C

05/01/2006

Electronic Signature of Signing Officer or Director

Date