

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005339

FILED
Apr 25, 2008
Secretary of State

Entity Name: U.C.T. YOUTH ASSOCIATION, INC.

Current Principal Place of Business:

632 NORTH PARK STREET
COLUMBUS, OH 43215

New Principal Place of Business:

Current Mailing Address:

632 NORTH PARK STREET
COLUMBUS, OH 43215

New Mailing Address:

FEI Number: 31-1409157

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHAHER, LAWRENCE E
6308 GRANT STREET
HOLLYWOOD, FL 33024 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: P () Delete
Name: THOMAS, JERRY
Address: 632 N. PARK STREET
City-St-Zip: COLUMBUS, OH 43215

Title: VP () Delete
Name: TUCKER, KENT
Address: 632 NORTH PARK STREET
City-St-Zip: COLUMBUS, OH 43215

Title: S () Delete
Name: SHAHER, SANDY
Address: 632 NORTH PARK ST
City-St-Zip: COLUMBUS, OH 43215

Title: T () Delete
Name: HECKER, KEVIN R
Address: 632 NORTH PARK ST.
City-St-Zip: COLUMBUS, OH 43215

Title: D () Delete
Name: HUNT, RON
Address: 632 NORTH PARK STREET
City-St-Zip: COLUMBUS, OH 43215

Title: D () Delete
Name: SMITH, TOM
Address: 632 NORTH PARK ST
City-St-Zip: COLUMBUS, OH 43215

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
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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 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: SANDRA SHAHER

SECY

04/25/2008

Electronic Signature of Signing Officer or Director

Date