## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000006027

FILED Mar 28, 2006 Secretary of State

Entity Name: CLAY COUNTY FRIENDS OF YOUTH, INC. **Current Principal Place of Business: New Principal Place of Business:** 443 CLERMONT DR W ORANGE PARK, FL 32073 **Current Mailing Address: New Mailing Address:** 443 CLERMONT DR W ORANGE PARK, FL 32073 FEI Number: 06-1642785 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BERLIN, DEWNA BERLIN, DAWNA 1120 PARK AVE 1120 PARK AVE ORANGE PARK, FL 32073 ORANGE PARK, FL 32073 US US 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: DAWNA BERLIN 03/28/2006 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete ROBY, ALVIN Name: Name: 443 CLERMONT DR W Address: Address: City-St-Zip: ORANGE PARK, FL 32073 City-St-Zip: Title: VD () Delete Title: VD (X) Change ( ) Addition Name: KIAFER, RICHARD Name: KIEFER, RICHARD Address: 2388 STAFFORD DR Address: 2388 STAFFORD DR City-St-Zip: ORANGE PARK, FL 32073 City-St-Zip: ORANGE PARK, FL 32073 Title: STD () Delete Title: () Change () Addition BERLIN, DAWNA Name: Name: Address: 1666 VILAGE WAY Address: City-St-Zip: ORANGE PARK, FL 32073 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: ALVIN ROBY PD 03/28/2006