


# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 23, 2006 8:00 am**  
**Secretary of State**

01-23-2006 90036 024 \*\*\*\*61.25

<b>DOCUMENT # N02000008011</b> 1. Entity Name YOUTH FOR CHRIST/INDIAN RIVER COUNTY, INC.					
Principal Place of Business 1086 38TH AVENUE VERO BEACH, FL 32960			Mailing Address P.O. BOX 651455 VERO BEACH, FL 32965-1455		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 14-1856035	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
SHIVES, SCOTT 1086 38TH AVENUE VERO BEACH, FL 32960				Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
<b>Filing Fee is \$61.25</b> <b>Due by May 1, 2006</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be</b> <b>Added to Fees</b>	
<b>Make check payable to</b> <b>Florida Department of State</b>					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BECHTEL, AL 7745 INDIAN OAKS DRIVE, APT H-301 VERO BEACH, FL 32966	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Joe Milkajonas (D) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 1055 Whitetail Ave SW Vero Beach, FL 32968	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MAYS, CAMERON 1545 46TH AVENUE VERO BEACH, FL 32960	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Richard Kusmer (D) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 4849 River Village Drive Vero Beach, FL 32967	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GOLDSMITH, JIM 1125 12TH STREET SUITE D VERO BEACH, FL 32960	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Don Meeks (D) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 295 43rd Avenue Vero Beach, FL 32968	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SMICK, TIM 225 OSPREY COURT VERO BEACH, FL 329632652	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	(D) Tanya Goldsmith <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 1275 30th Avenue Vero Beach, FL 32960	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHOMMER, VICKI 1460 56TH SQUARE WEST VERO BEACH, FL 329662396	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D EBERHART, CHARLES 1494 TREASURE COVE LANE VERO BEACH, FL 32963	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.					
<b>SIGNATURE:</b> _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			1-20-06 772-696-4790 Date Daytime Phone #		