

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002594

FILED
Mar 10, 2004
Secretary of State**Entity Name:** GADSDEN YOUTH CENTER, INC.**Current Principal Place of Business:**100 B & S LANE
QUINTY, FL 32351**New Principal Place of Business:**100 B & S LANE
QUINCY, FL 32351 US**Current Mailing Address:**PO BOX 1237
QUINCY, FL 323531237**New Mailing Address:**PO BOX 1237
QUINCY, FL 323531237 US**FEI Number:****FEI Number Applied For ()****FEI Number Not Applicable (X)****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**MORRIS, GWENDOLYN
1504 WILLOW BEND WAY
TALLAHASSEE, FL 32301 US**Name and Address of New Registered Agent:**BURNS, ALISHA
100 B & S LANE
QUINCY, FL 32351 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: ALISHA BURNS

03/10/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: PD () Delete
Name: MORRIS, GWENDOLYN
Address: 100 B & S LANE
City-St-Zip: QUINTY, FL 32351Title: VD () Delete
Name: CANNON, WILL
Address: 100 B & S LANE
City-St-Zip: QUINTY, FL 32351Title: SD () Delete
Name: BRADWELL, TYESHA
Address: 100 B & S LANE
City-St-Zip: QUINTY, FL 32351**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: PD (X) Change () Addition
Name: MORRIS, GWENDOLYN
Address: 100 B & S LANE
City-St-Zip: QUINCY, FL 32351Title: VD (X) Change () Addition
Name: ALEXANDER, JAORVONIA
Address: 100 B & S LANE
City-St-Zip: QUINCY, FL 32351Title: SD (X) Change () Addition
Name: DAVIS-GAVIN, BETTY
Address: 100 B & S LANE
City-St-Zip: QUINCY, FL 32351

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ALISHA BURNS

ED

03/10/2004

Electronic Signature of Signing Officer or Director

Date