

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N03000008147

FILED
Apr 08, 2005
Secretary of State

Entity Name: GUIDING YOUTH TO SUCCESS, INC.

Current Principal Place of Business:

1000 N. PACE BLVD
PENSACOLA, FL 32501

New Principal Place of Business:

GUIDING YOUTH TO SUCCESS, INC.
1000 N. PACE BLVD
PENSACOLA, FL 32505

Current Mailing Address:

3217 N. MILLER STREET
PENSACOLA, FL 32503

New Mailing Address:

P.O. BOX 2547
PENSACOLA, FL 32513

FEI Number: 06-1708308 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
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:

WASHINGTON, KATRINA D
3217 N. MILLER STREET
PENSACOLA, FL 32503 US

Name and Address of New Registered Agent:

WASHINGTON, KATRINA D
P.O. BOX 2547
PENSACOLA, FL 32513 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: KATRINA D. WASHINGTON

04/08/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WASHINGTON, KATRINA D
Address: 3217 N. MILLER STREET
City-St-Zip: PENSACOLA, FL 32503 US

Title: VP () Delete
Name: WASHINGTON, JANICE M
Address: 3217 N. MILLER STREET
City-St-Zip: PENSACOLA, FL 32503 US

Title: S () Delete
Name: WASHINGTON, JAMES B
Address: 7435 NORTHPOINTE BLVD
City-St-Zip: PENSACOLA, FL 32514 US

Title: T () Delete
Name: JENNIFER, TAYLOR
Address: 6798 VICTORIA DRIVE
City-St-Zip: MORROW, GA 30260 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: WASHINGTON, KATRINA D
Address: P.O. BOX 2547
City-St-Zip: PENSACOLA, FL 32513 US

Title: P (X) Change () Addition
Name: ROBERTS, MICHAEL
Address: P.O. BOX 2547
City-St-Zip: PENSACOLA, FL 32513 US

Title: VP (X) Change () Addition
Name: LONG, THOMAS
Address: P.O. BOX 2547
City-St-Zip: PENSACOLA, FL 32513 US

Title: T (X) Change () Addition
Name: GENE, MITCHELL
Address: P.O. BOX 2547
City-St-Zip: PENSACOLA, FL 32513 US

Title: S () Change (X) Addition
Name: WYVETTE, FORTE
Address: P.O. BOX 2547
City-St-Zip: PENSACOLA, FL 32513

Title: M () Change (X) Addition
Name: PATRICIA, MIKELSON
Address: P.O. BOX 2547
City-St-Zip: PENSACOLA, FL 32513

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: KATRINA D. WASHINGTON

D

04/08/2005

Electronic Signature of Signing Officer or Director

Date