2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000000424

FILED Apr 11, 2005 Secretary of State

Entity Name: YMCA FOUNDATION OF SOUTH PALM BEACH COUNTY, INC.

Current P	rincipal Place	of Business:	New Principal Place	e of Business:
	METTO CIR S TON, FL 33433	3		
Current Mailing Address:		New Mailing Address:		
	METTO CIR S TON, FL 3343(3		
El Number	: 05-0594761	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)
Name and	d Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:
BOCA RA	METTO CIR S TON, FL 3343(purpose of changing its registers	
	e named entity s e of Florida.	submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,
n the Stat	e of Florida.	submits this statement for the p	ourpose of changing its register	ed office of registered agent, of both,
n the Stat	e of Florida. RE:	ic Signature of Registered Ag		Date
n the Stat SIGNATU	e of Florida. RE:	ic Signature of Registered Ag	ent	
n the Stat SIGNATU DFFICER Title: Name: Address:	e of Florida. RE: Electron S AND DIREC	ic Signature of Registered Ago FORS: Delete DY B O CIR S	ent	Date
n the Stat BIGNATU DFFICER Title: Name: Address: City-St-Zip: Title: Name: Address:	e of Florida. RE: Electron S AND DIREC PD () NOBLES, RAND 6631 PALMETT BOCA RATON,	ic Signature of Registered Agr FORS: Delete OY B O CIR S FL 33433 Delete N A III O CIR S	ent ADDITIONS/CHANG Title: Name: Address:	Date BES TO OFFICERS AND DIRECTORS
n the Stat SIGNATU	e of Florida. RE: Electron S AND DIREC PD () NOBLES, RAND 6631 PALMETT BOCA RATON, I WARNER, JOHI 6631 PALMETT BOCA RATON, I	ic Signature of Registered Agr FORS: Delete PY B O CIR S FL 33433 Delete N A III O CIR S FL 33433 Delete V O CIR S	ent ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address:	Date BES TO OFFICERS AND DIRECTORS () Change () Addition

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: JOHN A. WARNER, III VD 04/11/2005