

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008126

FILED  
Apr 22, 2006  
Secretary of State

Entity Name: YOUTH DEVELOPMENT AUTHORITY INC.

**Current Principal Place of Business:**

549 ACORN RIDGE LN.  
ORANGE PARK, FL 32065

**New Principal Place of Business:**

**Current Mailing Address:**

549 ACORN RIDGE LN.  
ORANGE PARK, FL 32065

**New Mailing Address:**

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MARTIN, PATRICIA A  
549 ACORN RIDGE LN.  
ORANGE PARK, FL 32065 US

**Name and Address of New Registered Agent:**

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:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: MARTIN, PH.D., LLOYD D REV  
Address: 549 ACORN RIDGE LN.  
City-St-Zip: ORANGE PARK, FL 32065

Title: D ( ) Delete  
Name: MARTIN, PATRICIA A  
Address: 549 ACORN RIDGE LN.  
City-St-Zip: ORANGE PARK, FL 32065

Title: D ( ) Delete  
Name: FORQUER, GLADYS M  
Address: 2734 SCOTTWOOD RD.  
City-St-Zip: COLUMBUS, OH 43224

Title: D ( ) Delete  
Name: STRICKLAND, RICK  
Address: 10360 MEADOW POINTE DR.  
City-St-Zip: JACKSONVILLE, FL 32221

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: LLOYD D. MARTIN

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04/22/2006

Electronic Signature of Signing Officer or Director

Date