## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000010581

FILED Aug 01, 2007 Secretary of State

Entity Name: FOCUS ON FLAGLER YOUTH COALITION, INC. **Current Principal Place of Business: New Principal Place of Business:** 201 S LEMON ST 1000 BELLE TERRE BLVD BUNNELL, FL 32110 PALM COAST, FL 33137 **Current Mailing Address: New Mailing Address:** PO BOX 1598 BUNNELL, FL 32110 FEI Number: 20-3680503 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) 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: Name and Address of New Registered Agent: LILNKE, LYNDA LINKE, LYNDA 201 S LÉMON ST 1000 BELLE TERRE BLVD. BUNNELL, FL 32110 US PALM COAST, FL 32137 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: LYNDA LINKE 08/01/2007 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition LINKE, LYNDA LINKE, LYNDA Name: Name: 201 S LEMON ST Address: 1000 BELLE TERRE BLVD Address: City-St-Zip: BUNNELL, FL 32110 City-St-Zip: PALM COAST, FL 32137 Title: Title: ( ) Delete () Change () Addition Name: TERRALL, TAMI Name: Address: 344 S BEACH ST Address: City-St-Zip: DAYTONA BCH, FL 32114 City-St-Zip: Title: () Delete Title: () Change () Addition KENNEDY, LYNN Name: Name: 804 N WOODLAND BLVD Address: Address: City-St-Zip: DELAND, FL 32720 City-St-Zip: Title: () Delete Title: () Change () Addition Name: KNIGHT, MARSHA Name: 4721 E. MOODY BLVD. BLD. #5, STE. 505 Address: Address: City-St-Zip: BUNNELL, FL 32110 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition CONKLIN, COLLEEN LEE, ELANA Name: Name: 229 OCEAN PALM DRIVE 29 WESTBURY LANE Address: Address: City-St-Zip: FLAGLER BEACH, FL 32136 City-St-Zip: PALM COAST, FL 32164

I hereby certify that the information supplied with this filing does not qualify 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: ELANA LEE D 08/01/2007