

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000009879

FILED
Jul 10, 2007
Secretary of State

Entity Name: PCF FAMILY CONFERENCE AND YOUTH, INC.

Current Principal Place of Business:

3012 WEST 12TH STREET
JACKSONVILLE, FL 32254

New Principal Place of Business:

Current Mailing Address:

3012 WEST 12TH STREET
JACKSONVILLE, FL 32254

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **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:

LOGAN, CARL J
3012 WEST 12TH STREET
JACKSONVILLE, FL 32254 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LOGAN, CARL J
Address: 789 WELLHOUSE DR
City-St-Zip: JACKSONVILLE, FL 32220

Title: VP () Delete
Name: MCKINNEY, RALPH A SR
Address: 11032 RALEY CREEK DR SOUTH
City-St-Zip: JACKSONVILLE, FL 32225

Title: D () Delete
Name: MOSS, MICHAEL J
Address: 3012 WEST 12TH STREET
City-St-Zip: JACKSONVILLE, FL 32254

Title: D () Delete
Name: CURRELLEY, VALARIE
Address: 1505 MELVIN CIR
City-St-Zip: JACKSONVILLE, FL 32210

Title: D () Delete
Name: MAY, BRIAN
Address: 3012 WEST 12TH STREET
City-St-Zip: JACKSONVILLE, FL 32254

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:

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

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: CARL J. LOGAN

P

07/10/2007

Electronic Signature of Signing Officer or Director

Date