

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000011862

FILED  
Apr 17, 2009  
Secretary of State

Entity Name: GREATER ORLANDO USBC YOUTH, INC.

## Current Principal Place of Business:

1709 YVONNE STREET  
APOPKA, FL 32712

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 4004  
APOPKA, FL 32704 US

## New Mailing Address:

FEI Number: 04-3848833

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PAXSON, GREG  
1709 YVONNE STREET  
APOPKA, FL 32712 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: P ( ) Delete  
Name: YUKNAVAGE, LISA  
Address: 10941 TANGORA ST  
City-St-Zip: ORLANDO, FL 32825 US

Title: V ( ) Delete  
Name: HAMILTON, SONYA  
Address: 7226 W COLONIAL DR, BOX 324  
City-St-Zip: ORLANDO, FL 32803 US

Title: D ( ) Delete  
Name: SHRIDER, DIANA  
Address: 1870 BLACKFOOT TR  
City-St-Zip: ST CLOUD, FL 34771 US

Title: SAA ( ) Delete  
Name: HANNA, BOB  
Address: 663 SHEPARD RD  
City-St-Zip: ORLANDO, FL 32833 US

Title: M ( ) Delete  
Name: PAXSON, GREG  
Address: P.O. BOX 4004  
City-St-Zip: APOPKA, FL 327044004

Title: D ( ) Delete  
Name: HELLWIG, MARTY  
Address: 2209 KINDEL AVE  
City-St-Zip: WINTER PARK, FL 32789 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V (X) Change ( ) Addition  
Name: SHRIDER, DIANA  
Address: 1870 BLACKFOOT TR  
City-St-Zip: ST CLOUD, FL 34771 US

Title: D (X) Change ( ) Addition  
Name: VOGEL, CATHY  
Address: 3245 DEW CT  
City-St-Zip: KISSIMMEE, FL 34744 US

Title: SAA (X) Change ( ) Addition  
Name: MULLEN, SHERI  
Address: 945 FLORIDA AVE  
City-St-Zip: KISSIMMEE, FL 34743 US

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

Title: D (X) Change ( ) Addition  
Name: VALENTI, LINDA  
Address: 6025 GREENTURTLE AVE  
City-St-Zip: ORLANDO, FL 32822 US

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: GREGORY PAXSON

M

04/17/2009

Electronic Signature of Signing Officer or Director

Date