

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008547

FILED
Feb 19, 2008
Secretary of State

Entity Name: THE BRIDGE YOUTH CENTER, INC.

Current Principal Place of Business:

2128 CLEVELAND AVE
FT MYERS, FL 33901

New Principal Place of Business:

Current Mailing Address:

2128 CLEVELAND AVE
FT MYERS, FL 33901

New Mailing Address:

FEI Number: 65-1317987

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHICKS, JEFFREY
2128 CLEVELAND AVE
FT MYERS, FL 33901 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: MINOTT, AL
Address: 8600 PENZANCE BLVD
City-St-Zip: FT MYERS, FL 339120630

Title: D () Delete
Name: CERWINSKY, ED
Address: 1551 WOODWIND CT
City-St-Zip: FT MYERS, FL 339192028

Title: D () Delete
Name: MOLLE, JOHN
Address: 20471 ROOKERY DR
City-St-Zip: ESTERO, FL 339283040

Title: D () Delete
Name: TINKLEPAUGH, STEVE
Address: 5628 GOETZ DR
City-St-Zip: FT MYERS, FL 339193104

Title: D () Delete
Name: HOUGHTON, MAHLAN
Address: 3445 AVOCADO DR
City-St-Zip: FT MYERS, FL 339017700

Title: D () Delete
Name: WEBB, MARK
Address: 15 BAYWOOD CT
City-St-Zip: FT MYERS, FL 339197530

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:

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: DENNIS W PURKS

COMP

02/19/2008

Electronic Signature of Signing Officer or Director

Date