

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000010644

FILED  
May 01, 2012  
Secretary of State

**Entity Name:** GOWINS YOUTH FOUNDATION INC

**Current Principal Place of Business:**

1407 BAKER DRIVE  
MELBOURNE, FL 32901

**New Principal Place of Business:**

**Current Mailing Address:**

1407 BAKER DRIVE  
MELBOURNE, FL 32901

**New Mailing Address:**

**FEI Number:** 20-3215578

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HAMILTON, CAMILLE  
1407 BAKER DRIVE  
MELBOURNE, FL 32901 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  
Name: CLENNON, MARK  
Address: 1407 BAKER DRIVE  
City-St-Zip: MELBOURNE, FL 32901

Title: VP  
Name: SOFIELD, NIKKO  
Address: 1407 BAKER DRIVE  
City-St-Zip: MELBOURNE, FL 32901

Title: T  
Name: WINDROSS, VICTORIA  
Address: 1407 BAKER DRIVE  
City-St-Zip: MELBOURNE, FL 32901

Title: S  
Name: CLENNON, ALLISON  
Address: 1407 BAKER DRIVE  
City-St-Zip: MELBOURNE, FL 32901

Title: C  
Name: HAMILTON, CAMILLE  
Address: 1407 BAKER DRIVE  
City-St-Zip: MELBOURNE, FL 32901

I hereby 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 all other like empowered.

SIGNATURE: CAMILLE HAMILTON

C

05/01/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date