

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N17005 (2)
1. Corporation Name
YOUTH SHELTER PROPERTY MANAGEMENT, INC.

Principal Place of Business
**3691 EVANS AVE
FORT MYERS FL 33901
US**

Mailing Address
**3691 EVANS AVE
FORT MYERS FL 33901
US**



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 10/09/1986		3a. Date of Last Report 06/16/1995	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-2782295		Applied For Not Applicable	
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24	Country	29	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
CARTA, STEVEN 1619 JACKSON STREET FORT MYERS FL 33902				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City		
				85	Zip Code		

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____
(Signature, typed or printed name of registered agent and title if applicable)

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP
D	CARTA, STEVEN	1619 JACKSON STREET	FORT MYERS FL				
PD	SUITOR, DOUG	1485 SAN CARLOS BLVD.	FT. MYERS BEACH FL				
D	KRAEGAR, DONNA	585 E. GULF DR.	SANIBEL FL				
STD	LANGFORD, VERN	1556 POINCIANA AVE.	FORT MYERS FL				

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Vernon P. Langford
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
VERNON P. LANGFORD
4-8-96 941-278-5885

CR2E037 (12/95)