

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N26541

1. Entity Name

YOUTH DEVELOPMENT FOUNDATION, INC.

FILED

Mar 06, 2001 8:00 am
Secretary of State

03-06-2001 90358 025 ****61.25

Principal Place of Business

61 N. PINEAPPLE AVE.
SARASOTA FL 34236

Mailing Address

200 S ORANGE AVE
SARASOTA FL 34236
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0072626

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GRIMES, MICHELE B
200 S. ORANGE AVE.
SARASOTA FL 34236

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME O'NEILL, NANCY
STREET ADDRESS 4581 HIGEL AVENUE
CITY-ST-ZIP SARASOTA FL 34242 ☐ Delete

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE 2VPD
NAME PETERSON, LEE
STREET ADDRESS 8128 REGENTS CT
CITY-ST-ZIP UNIVERSITY PK FL 34201 ☒ Delete

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE 1VPD
NAME GRIMES, MICHELE
STREET ADDRESS 200 S. ORANGE AVE.
CITY-ST-ZIP SARASOTA FL 34236 ☐ Delete

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE TD
NAME WEBSTER, GAIL S
STREET ADDRESS 38 LAS BRISAS WAY
CITY-ST-ZIP NAPLES FL 33963 ☐ Delete

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE SD
NAME TROUTMAN, ELIZABETH
STREET ADDRESS 723 OAKVIEW DRIVE
CITY-ST-ZIP BRADENTON FL 34210 ☐ Delete

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Nancy O'Neill
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

February 21, 2001
Date

Daytime Phone #

CR2E037 (10/00)