

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N26541

FILED  
Feb 28, 2003  
Secretary of State

**Entity Name:** YOUTH DEVELOPMENT FOUNDATION, INC.

**Current Principal Place of Business:**

61 N. PINEAPPLE AVE.  
SARASOTA, FL 34236

**New Principal Place of Business:**

**Current Mailing Address:**

200 S ORANGE AVE  
SARASOTA, FL 34236 US

**New Mailing Address:**

**FEI Number:** 65-0072626

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GRIMES, MICHELE B  
200 S. ORANGE AVE.  
SARASOTA, FL 34236 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: PD ( ) Delete  
Name: O'NEILL, NANCY  
Address: 4581 HIGEL AVENUE  
City-St-Zip: SARASOTA, FL 34242

Title: 1VPD ( ) Delete  
Name: GRIMES, MICHELE  
Address: 200 S. ORANGE AVE.  
City-St-Zip: SARASOTA, FL 34236

Title: TD ( ) Delete  
Name: WEBSTER, GAIL S  
Address: 38 LAS BRISAS WAY  
City-St-Zip: NAPLES, FL 33963

Title: SD ( ) Delete  
Name: TROUTMAN, ELIZABETH  
Address: 723 OAKVIEW DRIVE  
City-St-Zip: BRADENTON, FL 34210

**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:

I hereby certify that the information supplied with this filing does not qualify for the 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 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:** MICHELE GRIMES

VP

02/28/2003

Electronic Signature of Signing Officer or Director

Date