SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997

AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE; \$236.25). NONPROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Morthaga ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1997 97 OCT -6 MID: 50 **DOCUMENT #** N31429 SARASOTA COUNTY YOUTH FOUNDATION, INC. Principal Place of Business Mailing Address **%** Charles J. Bartlett % CHARLES J. BARTLETT 2033 MAIN ST. SUITE 600 2033 MAIN ST. SUITE 800 DO NOT WRITE IN THIS SPACE SARASOTA FL 34237-6052 SARASOTA FL 34237-6052 3. Date Incorporated or Qualified 3a. Date of Last Report 03/30/1989 08/12/1996 2, Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0113865 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 29 30 25 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent BARTLETT, CHARLES J. 82 Street Address (P.O. Box Number is Not Acceptable) 2033 MAIN STREET 600002317636--9 83 SUITE 600 <u>-10/10/97--01094--001</u> SARASOTA FL 34237 84 City #5+4 Fode 25 *****61.20 11. Pursant 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** (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETÉ Change 1.1 TITLE Addition presud NAME BARTLETT, CHARLES J. 1.2 NAME dward Howell STREET ADDRESS 2033 MAIN ST. #600 1.3 STREET ADDRESS 1000 s school are Saresosa, EL SARASOTA FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETÉ Change TITLE 2.1 TITLE Addition WILKES, JOHN NAME Rich Lordan 4171 Grutville Rd STREET ADDRESS 777 N. TAMIAMI TRAIL 2.3 STREET ADDR CITY-ST-ZIP SARASOTA FL sarasota a 34239 2. 4 CITY - ST - 71 DELETÉ TITLE 3.1 TITLE Change Addition Treko. SNÝDER,, SANDY 1428 WESTBROOK DR. NAME 3.2 NAME Phyllis Anderson 525 crutville ed STREET ADDRESS 3.3 STREET ADDRESS SARASOTA FL CITY-ST-ZIP 3.4. CITY-ST-ZIP seresou, Re *34*23*9* TITLE DELETE 4.1 TITLE Change Addition Director NAME FLYNN, KEVIN 4.2 NAME Howard Karasick 4.3 STREET ADDRES STREET_ADDRESS ONE RAM WAY SHO D. TRAIL SARASOTA FL CITY-S 4.4 CiTY-ST-ZIP ASOTA DELETE ☐ Change TITLE 5.1 TITLE Addition NAME. MONGE, GEOFF 5.2 NAME STREET ADDRESS 2033 MAIN ST, #600 5.3 STREET ADDRESS CITY-ST-ZIP SARASOTA FL 5.4 CITY-ST-ZIP DELETE TITLE Addition SB 6.1 TITLE ☐ Change NAME BARTLETT, CHARLES J. 6.2 NAME STREET ADDRESS 2033 MAIN 61, #600 6.3 STREET ADDRESS SARASOTA FL CITY-ST-ZIP 6.4 CITY - ST-ZIP

14. I do 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 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 of an attachment with an address: