2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41049

Apr 29, 2008 Secretary of State

Entity Name: YOUTH FOR CHRIST OF POLK COUNTY, INC.

Current Principal Place of Business: New Principal Place of Business: 400 EAGLE LAKE LOOP RD. WINTER HAVEN, FL 33884 US **Current Mailing Address: New Mailing Address:** P. O. BOX 2584 WINTER HAVEN, FL 33883 US FEI Number: 59-3044336 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MORGAN, CHARLES O JR 1300 NW 167TH ST. MIAMI, FL 33169 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete BRONSON, C. DOUGLAS Name: Name: 1240 STRATTON CT. W. Address: Address: City-St-Zip: LAKELAND, FL 33813 City-St-Zip: Title: DC () Delete Title: DC (X) Change () Addition MAULDEN, D. FOX Name: HARDY, JOSIE M Name: Address: 5 CYPRESS COVE ROAD Address: 2131 HWY 60 E City-St-Zip: WINTER HAVEN, FL 33884 City-St-Zip: LAKE WALES, FL 33898 Title: DVC () Delete Title: DVC (X) Change () Addition HARDY, JOSIE M LABBE, ERIC Name: Name: 2131 HWY 60 E 815 NEW YORK AVENUE S Address: Address: City-St-Zip: LAKE WALES, FL 33898 City-St-Zip: LAKELAND, FL 33815 Title: DS Title: () Change () Addition () Delete SWENSON, KENNETH D Name: Name: Address: 9235 OAKWOOD DRIVE Address: City-St-Zip: LAKE WALES, FL 33853 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JOSIE M. HARDY DC 04/29/2008