

FILE NOW: FILING FEE IS \$61.25

FILED

Mar 10 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # N42668 (6)

1. Corporation Name

YOUTH VILLAGE OF VOLUSIA COUNTY, INC.



Principal Place of Business

Mailing Address

517 S RIDGEWOOD AVE
DAYTONA BEACH FL 32114
US

517 S RIDGEWOOD AVE
DDAYTONA BEACH FL 32114-4929
US

3. Date Incorporated or Qualified
03/25/1991

3a. Date of Last Report
01/29/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

4. FEI Number
59-3091263

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BENDIX, JOSEPH
517 S RIDGE WOOD AVE
DAYTONA BEACH FL 32114

81 Name

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

83

84 City

FL

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE TR ☐ DELETE
NAME BENDIX, JOSEPH
STREET ADDRESS 25 RIO PINAR TRAIL
CITY-ST-ZIP ORMOND BEACH FL

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS 7 Premanade + Lion's Paw
1.4 CITY-ST-ZIP Daytona Bch, FL 32124

TITLE TR ☐ DELETE
NAME LEWIS, LUEVA
STREET ADDRESS P O BOX 1301 NA
CITY-ST-ZIP HOLLY HILL FL

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE TR ☐ DELETE
NAME WILLHOIT, MARILYN
STREET ADDRESS 1617 CRESCENT RIDGE RD
CITY-ST-ZIP DAYTONA BEACH FL

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE TR ☐ DELETE
NAME SCHWARTZ, JUDY
STREET ADDRESS 4 LEISURE WOOD WAY
CITY-ST-ZIP ORMOND BEACH FL 32174

4.1 TITLE ☒ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS 7 Hickory Lane
4.4 CITY-ST-ZIP Daytona Bch, FL 32118

TITLE TR ☐ DELETE
NAME DOYLE, BOBBIE
STREET ADDRESS 6148 SEQUOIA DRIVE
CITY-ST-ZIP PORT ORANGE FL 32127

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE D ☐ DELETE
NAME STORKER, DON
STREET ADDRESS 141 OLD MILL RUN
CITY-ST-ZIP ORMOND BEACH FL 32174

6.1 TITLE ☒ Change ☐ Addition
6.2 NAME Don Stocker
6.3 STREET ADDRESS
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 on an amendment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #0001993

DON STOCKER 3/4/97

CR2E037 (9/96)