

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

RECE

FILED
Feb 10, 2003 8:00 am
Secretary of State

02-10-2003 90447 032 ****70.00

DOCUMENT # N42668

1. Entity Name
YOUTH VILLAGE OF VOLUSIA COUNTY, INC.



Principal Place of Business
517 S RIDGEWOOD AVE
DAYTONA BEACH FL 32114
US

Mailing Address
517 S RIDGEWOOD AVE
DAYTONA BEACH FL 32114
US



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 59-3091263

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

MAJURI, PATRICIA M
345 TRAILBLAZER DR
LAKE HELEN FL 32744

7. Name and Address of New Registered Agent

Name Maiuri, Patricia M.
Street Address (P.O. Box Number is Not Acceptable) 345 Trailblazer Drive
City Lake Helen FL Zip Code 32744

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Patricia Majuri*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

013003

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	MALURI, PATRICIA	
STREET ADDRESS	345 TRAILBLAZER DRIVE	
CITY-ST-ZIP	LAKE HELEN FL 32744	
TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	MAJURI, PATRICIA	
STREET ADDRESS	345 TRAILBLAZER DRIVE	
CITY-ST-ZIP	LAKE HELEN FL 32744	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	RODGERS, DEBRA	
STREET ADDRESS	5630 PALM AVENUE WEST	
CITY-ST-ZIP	HARBOR OAKS FL 32127	
TITLE	TD	<input type="checkbox"/> Delete
NAME	MELLINGER, STEVEN	
STREET ADDRESS	5913 PARK RIDGE CIRCLE	
CITY-ST-ZIP	PORT ORANGE FL 32127	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	DHAWAN, BETH	
STREET ADDRESS	12 COQUINA RIDGE WAY	
CITY-ST-ZIP	ORMOND BEACH FL 32174	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	SPERONI, JOSEPH	
STREET ADDRESS	159 IRON GATE CIRCLE	
CITY-ST-ZIP	PORT ORANGE FL 32119	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	M/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Mollie, Fran	
STREET ADDRESS	1203 Northside Drive	
CITY-ST-ZIP	Ormond Beach, FL 32174	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Williams, Sandra K.	
STREET ADDRESS	1246 Thomas Drive	
CITY-ST-ZIP	Port Orange, FL 32129	
TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Poulis, Deborah	
STREET ADDRESS	5630 Palm Avenue West	
CITY-ST-ZIP	Harbor Oaks, FL 32127	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Courtney Robin	
STREET ADDRESS	1417 Mollie Road	
CITY-ST-ZIP	Daytona Beach, FL 32114	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Boyd, Lefonia	
STREET ADDRESS	403 Howard Street	
CITY-ST-ZIP	New Smyrna Beach, FL 32168	
TITLE	VD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Speroni, Joseph	
STREET ADDRESS	159 Iron Gate Circle	
CITY-ST-ZIP	Port Orange, FL 32119	

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: *Patricia Majuri*

013003 (1386) 248-2771

CR2E037 (10/02)

Attachment

RE: 2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

Document #N42668

30032718

Block 11.

Addition

P/D

Patricia Maiuri

345 Trailblazer Drive

Lake Helen, FL 32744