

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONSFILED
Apr 01, 1999 8:00 am
Secretary of State

04-01-1999 90026 025 ****61.25

DOCUMENT # N46064

1. Corporation Name

WASHINGTON COUNTY YOUTH FAIR, INC.

Principal Place of Business

1424 JACKSON AVENUE
SUITE A
CHIPLEY FL 32428

Mailing Address

1424 JACKSON AVENUE
SUITE A
CHIPLEY FL 32428

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip 25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip 29 Country

3. Date Incorporated or Qualified

11/18/1991

4. FEI Number

59-2961419

Applied For

Not Applicable

5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required6. Election Campaign Financing ☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

SOLGER, DAVID
1424 JACKSON AVENUE, SUITE A
CHIPLEY FL 32428

10. Name and Address of New Registered Agent

81 Name Judy Corbus
82 Street Address (P.O. Box Number is Not Acceptable)
1424 Jackson Ave, Suite A
83
84 City Chipley FL 85 Zip Code 32428

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 Judith L. Corbus

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

3-29-99

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☒ DELETE
NAME SOLGER, DAVID
STREET ADDRESS 1424 JACKSON AVENUE, SUITE A
CITY-ST-ZIP CHIPLEY FL 32428TITLE VD ☐ DELETE
NAME CORBUS, JUDY
STREET ADDRESS 1424 JACKSON AVENUE, SUITE A
CITY-ST-ZIP CHIPLEY FL 32428TITLE SD ☐ DELETE
NAME ALEXANDER, NANCY
STREET ADDRESS 1424 JACKSON AVENUE, SUITE A
CITY-ST-ZIP CHIPLEY FL 32428TITLE TD ☐ DELETE
NAME LAMB, VICKI C
STREET ADDRESS 1424 JACKSON AVENUE, SUITE A
CITY-ST-ZIP CHIPLEY FL 32428TITLE V ☐ DELETE
NAME PATE, CLINT
STREET ADDRESS 1424 JACKSON AVENUE, SUITE A
CITY-ST-ZIP CHIPLEY FL 32428TITLE S ☒ DELETE
NAME FISHER, LORA
STREET ADDRESS 1424 JACKSON AVENUE, SUITE A
CITY-ST-ZIP CHIPLEY FL 32428

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D ☒ Change ☒ Addition
1.2 NAME CORBUS, Judy
1.3 STREET ADDRESS 1424 Jackson Ave, Suite A
1.4 CITY-ST-ZIP Chipley, FL 324282.1 TITLE VD ☒ Change ☒ Addition
2.2 NAME Alexander, Nancy
2.3 STREET ADDRESS 1424 Jackson Ave, Suite A
2.4 CITY-ST-ZIP Chipley, FL 324283.1 TITLE SD ☒ Change ☒ Addition
3.2 NAME Sewell, Donna
3.3 STREET ADDRESS 1424 Jackson Ave, Suite A
3.4 CITY-ST-ZIP Chipley, FL 324284.1 TITLE TD ☐ Change ☐ Addition
4.2 NAME Lamb, Vicki C
4.3 STREET ADDRESS 1424 Jackson Ave Suite A
4.4 CITY-ST-ZIP Chipley, FL 324285.1 TITLE V ☐ Change ☐ Addition
5.2 NAME Pate, Clint
5.3 STREET ADDRESS 1424 Jackson Ave Suite A
5.4 CITY-ST-ZIP Chipley, FL 324286.1 TITLE S ☒ Change ☒ Addition
6.2 NAME Lee, Brian
6.3 STREET ADDRESS 1424 Jackson Ave, Suite A
6.4 CITY-ST-ZIP Chipley, FL 32428

14. 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 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 attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

3-29-99

Date

Daytime Phone #

CR2F037 (11/98)