

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 24, 2006 8:00 am
Secretary of State

02-24-2006 90014 007 ****61.25

DOCUMENT # N48454 1. Entity Name YOUTH INVESTMENT SHARES, INC.					
Principal Place of Business 5200 BRITTANY DR S #1103 ST PETERSBURG, FL 33715			Mailing Address 5200 BRITTANY DR S #1103 ST PETERSBURG, FL 33715		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 23-7259853	
5. Certificate of Status Desired ☐				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent MCKELVEY T BRUCE 5200 BRITTANY DR S #1103 ST PETERSBURG, FL 33715				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
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.				FL Zip Code	
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating)					
Filing Fee is \$61.25 Due by May 1, 2006					
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	☒ Delete	TITLE	PED MITCHELL COFFMAN	☐ Change ☒ Addition
NAME	BALDWIN, JANE		NAME	3900 1st St No	
STREET ADDRESS	922 39TH AVE NE		STREET ADDRESS	ST PETERSBURG FL 33703	
CITY-ST-ZIP	SAINT PETERSBURG, FL 33703		CITY-ST-ZIP	ST PETERSBURG FL 33703	
TITLE	VPD	☒ Delete	TITLE	J.C. RUSSELL	☐ Change ☒ Addition
NAME	MURPHY, SR., LOUIS M		NAME	2905 4th St No	
STREET ADDRESS	955 20TH ST SOUTH		STREET ADDRESS	ST PETERSBURG FL 33704	
CITY-ST-ZIP	SAINT PETERSBURG, FL 33712		CITY-ST-ZIP	ST PETERSBURG FL 33704	
TITLE	PED	☐ Delete	TITLE	FD	☒ Change ☐ Addition
NAME	SWANSON, CATHY P		NAME		
STREET ADDRESS	UNITED BANK-333 3RD AVE. NO.		STREET ADDRESS		
CITY-ST-ZIP	SAINT PETERSBURG, FL 33701		CITY-ST-ZIP		
TITLE	VD	☐ Delete	TITLE	AKLARD, WILLIAM	☒ Change ☐ Addition
NAME	AKBARD, WUKKUAN		NAME	695 CENTRAL AVE SE 207	
STREET ADDRESS	695 CENTRAL AVE		STREET ADDRESS	ST PETERSBURG FL 33701	
CITY-ST-ZIP	SAINT PETERSBURG, FL 33701		CITY-ST-ZIP	ST PETERSBURG FL 33701	
TITLE	ST	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	MCKELVEY, T. BRUCE		NAME		
STREET ADDRESS	5200 BRITTANY DR. SO APT. 1103		STREET ADDRESS		
CITY-ST-ZIP	ST. PETERSBURG, FL 33715		CITY-ST-ZIP		
TITLE	VPD	☐ Delete	TITLE	PPD	☒ Change ☐ Addition
NAME	KARNAVICIUS, AL		NAME		
STREET ADDRESS	BAYPRINT-1101 1ST AVE SO.		STREET ADDRESS		
CITY-ST-ZIP	SAINT PETERSBURG, FL 33705		CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <i>[Signature]</i> 2/21/06 (727) 267-6956					