

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N48852

FILED
Jan 22, 2002 8:00 AM
Secretary of State

Entity Name: YOUTH CRISIS CENTER FOUNDATION, INC.

Current Principal Place of Business:

7007 BEACH BLVD.
JACKSONVILLE, FL 32216 US

New Principal Place of Business:

Current Mailing Address:

7007 BEACH BLVD.
JACKSONVILLE, FL 32216 US

New Mailing Address:

FEI Number: 59-3123710

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PATANIA, TOM
7007 BEACH BLVD.
JACKSONVILLE, FL 32216 US

Name and Address of New Registered Agent:

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:

Title: T () Delete
Name: PATANIA, TOM
Address: 7007 BEACH BLVD.
City-St-Zip: JACKSONVILLE, FL 32216

Title: CT () Delete
Name: JOEL, ROBERT W
Address: 111 RIVERSIDE AVE
City-St-Zip: JACKSONVILLE, FL

Title: T () Delete
Name: MILLER, JAMES A
Address: 6650 SOUTHPOINT PKWY, #100
City-St-Zip: JACKSONVILLE, FL 322551620

Title: T () Delete
Name: VAN VLECK, JAMES
Address: 409 PONTE VERDA BLVD
City-St-Zip: PONTE VERDE BEACH, FL 32082

Title: T () Delete
Name: GELLATLY, MARGARET
Address: 1224 PONTE VEDRA BLVD
City-St-Zip: PONTE VEDRA BCH, FL 32082

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PATANIA, TOM
Address: 7007 BEACH BLVD.
City-St-Zip: JACKSONVILLE, FL 32216

Title: CD (X) Change () Addition
Name: JOEL, ROBERT W
Address: 200 W. FORSYTH ST., #1600
City-St-Zip: JACKSONVILLE, FL 32202

Title: D (X) Change () Addition
Name: MILLER, JAMES A
Address: 6650 SOUTHPOINT PKWY, #100
City-St-Zip: JACKSONVILLE, FL 322551620

Title: TD (X) Change () Addition
Name: VAN VLECK, JAMES
Address: 409 PONTE VERDA BLVD
City-St-Zip: PONTE VERDE BEACH, FL 32082

Title: SD (X) Change () Addition
Name: GELLATLY, MARGARET
Address: 1224 PONTE VEDRA BLVD
City-St-Zip: PONTE VEDRA BCH, FL 32082

I hereby certify that the information supplied with this filing does not qualify for the 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 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: TOM PATANIA

P

01/22/2002

Electronic Signature of Signing Officer or Director

Date