

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



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

FILED

98 MAR -4 AM 8:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 093000003551
1. Corporation Name
Godsden Youth Development Council, Inc.

Principal Place of Business
209 S. Duval St.
Quincy, Fla. 32351
Mailing Address
408 South St.
Quincy, Fla. 32351

3. Date Incorporated or Qualified

08/05/1993

4. FEI Number

57-3200993

Applied For

Not Applicable

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐

Yes

☐

No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Joseph Long III
408 South St.
Quincy, Fla. 32351

81 Name

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

83

300002448233--0

84 City

03/05/98-01059-002

*****61. FL

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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

TITLE ☐ DELETE

NAME PD
Long, Joseph III
STREET ADDRESS 408 South St.
CITY-ST-ZIP Quincy, Fla. 32351

TITLE ☐ DELETE

NAME VPD
Mitthell, James
STREET ADDRESS P.O. Box 1661 N/A
CITY-ST-ZIP Quincy, Fla. 32351

TITLE ☐ DELETE

NAME TD
Holt, Harry
STREET ADDRESS 416 West Laura St.
CITY-ST-ZIP Quincy, Fla. 32351

TITLE ☐ DELETE

NAME D
Monroe, Eugene Jr.
STREET ADDRESS Rte 6, Box 334-P N/A
CITY-ST-ZIP Quincy, Fla. 32351

TITLE ☐ DELETE

NAME D
McGill, Bill
STREET ADDRESS 209 South Duval St.
CITY-ST-ZIP Quincy, Fla. 32351

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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, changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/3/98

Date

850-627-3011

Daytime Phone #

CR2E037 (10/97)