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NONPROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N93000005140

1. Corporation Name
TALLAHASSEE YOUNG MEN'S CHRISTIAN ASSOCIATION, I NC.

Principal Place of Business	Mailing Address
2001 APALACHEE PARKWAY TALLAHASSEE FL 32301	2001 APALACHEE PARKWAY TALLAHASSEE FL 32301

2. Principal Place of Business (21) — Suite, Apt. #, etc. (22) — City & State (23) — Zip (24) Country (25)

2a. Mailing Address (26) — Suite, Apt. #, etc. (27) — City & State (28) — Zip (29) Country (30)

3. Date Incorporated or Qualified: 11/16/1993

4. FEI Number: 59-0909247 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

COLE, BRADLEY D
2001 APALACHEE PKWY
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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 BRADLEY D COLE BRADLEY D COLE 2/25/99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	COLE, BRADLEY D		1.2 NAME		
STREET ADDRESS	2001 APALACHEE PKWY		1.3 STREET ADDRESS		
CITY-ST-ZIP	TALLAHASSEE FL 32301		1.4 CITY-ST-ZIP		
TITLE	VP	☑ DELETE	2.1 TITLE	Chairman	☑ Change ☐ Addition
NAME	LAWHORN, NANCY DELL		2.2 NAME	Terry Madigan	D
STREET ADDRESS	2001 APALACHEE PKWY		2.3 STREET ADDRESS	215 S Monroe St. Suite 600	
CITY-ST-ZIP	TALLAHASSEE FL 32301		2.4 CITY-ST-ZIP	Tallahassee, FL 32301	
TITLE	CD	☑ DELETE	3.1 TITLE	Past Chairman	☑ Change ☐ Addition
NAME	CARROL, KEVIN		3.2 NAME	Kevin Carroll	D
STREET ADDRESS	P.O. BOX 391 N/A		3.3 STREET ADDRESS	P.O. Box 391	
CITY-ST-ZIP	TALLAHASSEE FL 32302		3.4 CITY-ST-ZIP	Tallahassee FL 32302	
TITLE	VCD	☑ DELETE	4.1 TITLE	Vice Chairman	☐ Change ☑ Addition
NAME	MADIGAN, TERRY		4.2 NAME	Greg DeLoach	D
STREET ADDRESS	200 W COLLEGE AVE		4.3 STREET ADDRESS	P.O. Box 749	
CITY-ST-ZIP	TALLAHASSEE FL 32301		4.4 CITY-ST-ZIP	Tallahassee, FL 32302	
TITLE	SD	☑ DELETE	5.1 TITLE	Vice Chairman	☐ Change ☑ Addition
NAME	LEWIS, JUDGE TERRY		5.2 NAME	Frank Shaw III	D
STREET ADDRESS	301 S MONROE, ROOM 265A		5.3 STREET ADDRESS	3520 Thomasville Rd 4th Floor	
CITY-ST-ZIP	TALLAHASSEE FL 32301		5.4 CITY-ST-ZIP	Tallahassee, FL 32308	
TITLE	TD	☑ DELETE	6.1 TITLE	Vice Chairman	☐ Change ☑ Addition
NAME	FERGUSON, BILL		6.2 NAME	Theo W. Proctor III	D
STREET ADDRESS	P.O. BOX 14569 N/A		6.3 STREET ADDRESS	P.O. Box 230	
CITY-ST-ZIP	TALLAHASSEE FL 32317		6.4 CITY-ST-ZIP	Tallahassee FL 32304	

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: BRADLEY D COLE REQUIRED BRADLEY D. COLE 2/25/99 877-6151
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E037 (11/98)