

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005140

FILED
Feb 27, 2009
Secretary of State

Entity Name: CAPITAL REGION YOUNG MEN'S CHRISTIAN ASSOCIATION, INC.

Current Principal Place of Business:

2001 APALACHEE PARKWAY
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

2001 APALACHEE PARKWAY
TALLAHASSEE, FL 32301

New Mailing Address:

FEI Number: 59-0808247

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONKLIN, PEGGY S
2001 APALACHEE PKWY
TALLAHASSEE, FL 32301 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: D () Delete
Name: MAY, DON
Address: 3220 THOMASVILLE ROAD
City-St-Zip: TALLAHASSEE, FL 32309

Title: CVO () Delete
Name: CURETON, BRYAN
Address: 217 JOHN KNOX ROAD
City-St-Zip: TALLAHASSEE, FL 32303

Title: D () Delete
Name: FONTENOT, ROMAN
Address: 1989 COMMONWEALTH LANE
City-St-Zip: TALLAHASSEE, FL 32303

Title: D () Delete
Name: COLLETTE, CHIP
Address: 108 WINN CAY DRIVE
City-St-Zip: TALLAHASSEE, FL 32303

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: BRYAN CURETON

CVO

02/27/2009

Electronic Signature of Signing Officer or Director

Date