

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N94000003619

FILED
Apr 30, 2002 8:00 AM
Secretary of State

Entity Name: THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF MARTIN COUNTY FOUNDATION, INC.

Current Principal Place of Business:

1700 SE MONTEREY ROAD
STUART, FL 34996

New Principal Place of Business:

Current Mailing Address:

1700 SE MONTEREY ROAD
STUART, FL 34996

New Mailing Address:

FEI Number: 65-0511775

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LASS, JOHN M
1700 SE MONTEREY ROAD
STUART, FL 34996 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: LASS, JOHN M
Address: 1700 MONTEREY RD
City-St-Zip: STUART, FL 34996

Title: P () Delete
Name: FEDOREK, JOHN J
Address: 2100 SE OCEAN BLVD
City-St-Zip: STUART, FL 34996

Title: D () Delete
Name: ARLINE, SHIRLEY
Address: P.O. BOX 8142
City-St-Zip: JUPITER, FL 334688142

Title: D () Delete
Name: CACELLA, FRANK
Address: 1514 N.E. JENSEN BEACH BLVD
City-St-Zip: JENSEN BEACH, FL 34957

Title: D (X) Delete
Name: DERITA, THOMAS JR
Address: 777 S FLAGLER DRIVE E-300
City-St-Zip: WEST PALM BEACH, FL 33401

Title: D (X) Delete
Name: HUDSON, DENNIS III
Address: P.O. BOX 9012
City-St-Zip: STUART, FL 349959012

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LASS, JOHN M
Address: 1700 MONTEREY RD
City-St-Zip: STUART, FL 34996

Title: D/T (X) Change () Addition
Name: TAYLOR, ANDREW
Address: 15950 SW KANNER HWY
City-St-Zip: INDIANTOWN, FL 34956

Title: D/S (X) Change () Addition
Name: MCCANN, JAMES
Address: 516 SW CAMDEN AVE
City-St-Zip: STUART, FL 34994

Title: D/C (X) Change () Addition
Name: CACELLA, FRANK
Address: 1514 N.E. JENSEN BEACH BLVD
City-St-Zip: JENSEN BEACH, FL 34957

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 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: JOHN M. LASS

P

04/30/2002

Electronic Signature of Signing Officer or Director

Date