

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.)

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # N95000005893 (1)

1. Corporation Name

WEST AREA YOUTH DEVELOPMENT ASSOCIATION, INC.



Principal Place of Business

Mailing Address

2301 PALM GLADES DR
 BELLE GLADE FL 33430

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 BELLE GLADE FL 33430

3. Date Incorporated or Qualified **12/12/1995** 3a. Date of Last Report

21. Principal Place of Business Palm Glades Dr.		2a. Mailing Address 2301 Palm Glades Dr.		4. FEI Number <input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
22. Suite, Apt. #, etc. 2301		27. Suite, Apt. #, etc. 2301		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
23. City & State Belle Glade, FLA.		28. City & State Belle Glade FLA		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24. Zip 33430	25. Country Palm Beach	29. Zip 33430	30. Country Palm Beach	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DIAMOND, LARRY
 2301 PALM GLADES DR
 BELLE GLADE FL 33430

81. Name LARRY Diamond
82. Street Address (P.O. Box Number is Not Acceptable) 2301 Palm Glades Dr.
83.
84. Belle Glade FL 85. Zip Code 33430

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 LARRY DIAMOND Larry Diamond 7/23/96
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 Executive Director <input checked="" type="checkbox"/> DELETE	NAME LARRY Diamond (P)	1.1 TITLE President, CEO <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	1.2 NAME Larry Diamond (P)
STREET ADDRESS 2301 Palm Glades Dr.	CITY-ST-ZIP Belle Glade FL 33430	1.3 STREET ADDRESS 2301 Palm Glades Dr.	1.4 CITY-ST-ZIP Belle Glade FL 33430
TITLE Deputy Director <input checked="" type="checkbox"/> DELETE	NAME Robert Walker	2.1 TITLE Executive Director <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	2.2 NAME Cathy Diamond
STREET ADDRESS 502 Palm Glades Dr.	CITY-ST-ZIP Belle Glade FL 33430	2.3 STREET ADDRESS 2301 Palm Glades Dr.	2.4 CITY-ST-ZIP Belle Glade FL 33430
TITLE Recreation Coordinator <input checked="" type="checkbox"/> DELETE	NAME Marvin Glover	3.1 TITLE Board of Director member <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	3.2 NAME Marilyn Police
STREET ADDRESS 225 SW 5th Ave.	CITY-ST-ZIP South Bay FL 33493	3.3 STREET ADDRESS 200-A Down Circle	3.4 CITY-ST-ZIP Belle Glade FL 33430
TITLE Initiatives Specialist <input checked="" type="checkbox"/> DELETE	NAME Russell Rattau	4.1 TITLE Board of Director member <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	4.2 NAME EUGENE JONES
STREET ADDRESS 1504 Palm Glades Dr.	CITY-ST-ZIP Belle Glade FL 33430	4.3 STREET ADDRESS 1901 NW 16TH ST BELLE GLADE FLA	4.4 CITY-ST-ZIP 33430
TITLE <input type="checkbox"/> DELETE	NAME	5.1 TITLE Board of Director member <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	5.2 NAME Eugene Babbs
STREET ADDRESS	CITY-ST-ZIP	5.3 STREET ADDRESS 1420 PALM PLAGE	5.4 CITY-ST-ZIP PalmBee FL 33476
TITLE <input type="checkbox"/> DELETE	NAME	6.1 TITLE	6.2 NAME
STREET ADDRESS	CITY-ST-ZIP	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: LARRY DIAMOND 7/23/96 (407) 976-7057
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (3/96)