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May 04, 1999 8:00 am
Secretary of State

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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N96000001878

1. Corporation Name
ESTEEM FOR FLORIDA YOUTH, INC.

Principal Place of Business 718 MARGARET SQUARE WINTER PARK FL 32789	Mailing Address 718 MARGARET SQUARE WINTER PARK FL 32789
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29	3. Date Incorporated or Qualified 04/08/1996	4. FEI Number 59-3377202 Applied For Not Applicable	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
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9. Name and Address of Current Registered Agent MANN, PAMELA 718 MARGARET SQUARE WINTER PARK FL 32789	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
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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE D <input type="checkbox"/> DELETE	BEHRLE, JOHN SOUTHTRUST BANK ORLANDO FL 32801	1.1 TITLE T BEHRLE, JOHN <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	SOUTHTRUST BANK 2610 S. ORANGE AVE. ORLANDO, FL 32806
TITLE D <input type="checkbox"/> DELETE	HINCKLEY, LYNDA 718 MARGARET ST. WINTER PARK HOUSING WINTER PARK FL 32789	2.1 TITLE S LYNDA HINCKLEY <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	WINTER PARK HOUSING 718 MARGARET SQ. WINTER PARK, FL 32789
TITLE D <input type="checkbox"/> DELETE	BACON, LARRY W P.O. BOX 4970 ORLANDO FL 32802	3.1 TITLE LARRY W. BACON <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	SEMINOLE COUNTY CORRECTIONS 211 BUSH BLVD. SANFORD, FL 32773
TITLE <input type="checkbox"/> DELETE		4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE <input type="checkbox"/> DELETE		5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE <input type="checkbox"/> DELETE		6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	

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: *Lynnda Shackley* 4-27-99
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: **LYNDA HINCKLEY** DATE: _____ DAYTIME PHONE #: 407

CR2E037 (11/98)