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Jul 02 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N96000002827 (1)
1. Corporation Name
YOUNG CITIZENS CONSERVATION CORPS, INC.



Principal Place of Business 6260 NORTH FEDERAL HIGHWAY SUITE 551 FT. LAUDERDALE FL 33308	Mailing Address 6260 NORTH FEDERAL HIGHWAY SUITE 551 FT. LAUDERDALE FL 33308
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3. Date Incorporated or Qualified 05/29/1996		
4. FEI Number 65-0667254	Applied For <input type="checkbox"/>	Not Applicable <input checked="" type="checkbox"/>
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	
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

2. Principal Place of Business 21 6278 N. Federal Hwy Suite, Apt., #, etc.	2a. Mailing Address 26 7 Mendoza Lane Suite, Apt., #, etc.		
22 Suite 551	27		
23 Ft Lauderdale, FL City & State	28 Sea Ranch Lakes, FL City & State		
24 33308 Zip	25 Broward Country	29 33308 Zip	30 Broward Country

9. Name and Address of Current Registered Agent
**BEGGS, BARBARA T
6260 NORTH FEDERAL HIGHWAY
SUITE 551
FT. LAUDERDALE FL 33308**

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	6278 N Federal Hwy.
83	Suite 551
84 City	Ft Lauderdale, FL
85 Zip Code	33308

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 Barbara T. Beggs William F. Beggs 5/1/98
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		DELETED
TITLE	BEGGS, BARBARA T	<input checked="" type="checkbox"/>
NAME	7 MENDOZA LANE	
STREET ADDRESS	SEARANCH LAKES FL 33308	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		CHANGED	ADDITION
1.1 TITLE	0 PRESIDENT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
1.2 NAME	Barbara Taylor Beggs		
1.3 STREET ADDRESS	7 MENDOZA LANE		
1.4 CITY-ST-ZIP	SEA RANCH LAKES FL 33308		
2.1 TITLE	1 William F. Beggs, Vice	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2.2 NAME	7 Mendoza Lane President		
2.3 STREET ADDRESS			
2.4 CITY-ST-ZIP	SEA RANCH LAKES, FL 33308		
3.1 TITLE	1 SECRETREASURER	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3.2 NAME	KATALAN BACUERI		
3.3 STREET ADDRESS	1507 NE 17 AVE		
3.4 CITY-ST-ZIP	FT LAUDERDALE FL 33304		
4.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY-ST-ZIP			

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.

SIGNATURE Barbara T. Beggs Barbara T. Beggs 954-710-7100

CR2E037 (10/97)