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FILED
Mar 31 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N96000006613 (1)**

1. Corporation Name

BARTOW YOUTH PLANNING COMMITTEE, INC.

Principal Place of Business

Mailing Address

**1255 W POLK STREET
BARTOW FL 33830**

**P O BOX 702
BARTOW FL 33830**



2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

12/26/1996

4. FEI Number

59-3431011

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

10. Name and Address of New Registered Agent

**WASHINGTON, WILLIE L
710 N GORDON AVE
BARTOW FL 33830**

81 Name

82 Street Address (P.O. Box Number Is Not Acceptable)

83

84 City

FL

85 Zip Code

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

XSS *Willie L. Washington*

WILLIE L. WASHINGTON

3-27-98

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE

S

☒ DELETE

NAME

BELL, SHEILA M

STREET ADDRESS

801 RUBY AVE.

CITY-ST-ZIP

BARTOW FL

TITLE

S

☒ DELETE

NAME

COOK, BRENDA

STREET ADDRESS

925 TANGELO DRIVE

CITY-ST-ZIP

BARTOW FL

TITLE

PO

☐ DELETE

NAME

SANDERS, JERRY

STREET ADDRESS

175 W VALENCIA DR

CITY-ST-ZIP

BARTOW FL

TITLE

VPD

☐ DELETE

NAME

GREEN, RON

STREET ADDRESS

1590 WABASH

CITY-ST-ZIP

BARTOW FL

TITLE

TO

☐ DELETE

NAME

MYRICK, WILLIE J JR.

STREET ADDRESS

45875 REMINGTON ROAD

CITY-ST-ZIP

LAKELAND FL

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

S

☐ Change ☒ Addition

1.2 NAME

Kindle, Preston L.

1.3 STREET ADDRESS

807 Kathy Road

1.4 CITY-ST-ZIP

Bartow, FL

2.1 TITLE

☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

☐ Change ☐ Addition

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:

Jerry Sanders

JERRY SANDERS

3-27-98

CR2E037 (10/97)