2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000736

FILED Sep 08, 2008 Secretary of State

Entity Name: WEST DUVAL YOUTH ASSOCIATION, INC.

Current Principal Place of Business: New Principal F	Place of Business:
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7701 WHEAT RD JACKSONVILLE, FL 32244

Current Mailing Address: New Mailing Address:

PO BOX 14749 JACKSONVILLE, FL 32244

FEI Number: 04-3687704 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GODBOLD, LESA 7408 OVERLAND PARK BLVD JACKSONVILLE, FL 32244

OFFICERS AND DIRECTORS:

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

DAIGLE, JEANNETTE GODBOLD, LESA Name: Name: Address: 1751 BLAIR RD. Address: 7408 OVERLAND PARK BLVD City-St-Zip: JACKSONVILLE, FL 32244 City-St-Zip: JACKSONVILLE, FL 32244

Title: () Delete Title: (X) Change () Addition Name: SPENCER, IRENE Name: GODBOLD, CHRISTOPHER Address: 8123 COLERIDGE CT Address: 7408 OVERLAND PARK BLVD City-St-Zip: JACKSONVILLE, FL 32244 City-St-Zip: JACKSONVILLE, FL 32244

Title: (X) Delete Title: () Change () Addition

WAYCHOFF, RICK Name: Name: 1369 PERTH ROAD Address: Address: City-St-Zip: JACKSONVILLE, FL 32244 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: LESA GODBOLD D/T 09/08/2008