

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008968

Entity Name: GIFFORD YOUTH ACHIEVEMENT CENTER, INC.**Current Principal Place of Business:**4875 43RD AVE.
VERO BEACH, FL 32967**Current Mailing Address:**4875 43RD AVE.
VERO BEACH, FL 32967**FEI Number: 43-1950911****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**PERRY, ANGELIA
4875 43RD AVENUE
VERO BEACH, FL 32967 US*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**Officer/Director Detail :**

Title	CHAIRMAN
Name	TAYLOR-LONG, DEBORAH DR.
Address	P. O. BOX 507
City-State-Zip:	VERO BEACH FL 32961

Title	VC
Name	LUNCEFORD, CHARLES
Address	6155 COLLEGE LANE
City-State-Zip:	VERO BEACH FL 32966

Title	SECRETARY
Name	O'MARA, PATTI
Address	958 ISLAND CLUB SQUARE
City-State-Zip:	VERO BEACH FL 32963

Title	CEO
Name	PERRY, ANGELIA
Address	4875 43RD AVE.
City-State-Zip:	VERO BEACH FL 32967

Title	TREASURER
Name	ALEXANDER, SCOTT
Address	5360 E. HARBOR VILLAGE DRIVE, #304
City-State-Zip:	VERO BEACH FL 32967

I hereby 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 all other like empowered.

SIGNATURE: ANGELIA PERRY**EXECUTIVE DIRECTOR****02/15/2023**_____
Electronic Signature of Signing Officer/Director Detail_____
Date