

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008968

Entity Name: GIFFORD YOUTH ACTIVITY 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	DC
Name	BOLINGER, ADAM
Address	755 BEACHLAND BLVD.
City-State-Zip:	VERO BEACH FL 32963

Title	D
Name	GIPSON, GODFREY
Address	4136 57TH COURT
City-State-Zip:	VERO BEACH FL 32967

Title	DT
Name	JOHNSON, CYNTHIA P
Address	1130 ANSLEY AVENUE, SW
City-State-Zip:	VERO BEACH FL 32968

Title	DS
Name	ROSALEN, CLINE
Address	330 INDIAN HARBOR ROAD
City-State-Zip:	VERO BEACH FL 32963

Title	CEO
Name	PERRY, ANGELIA
Address	4875 43RD AVE.
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****02/23/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date