2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 31, 2008 8:00 am
Secretary of State
01-31-2008 90021 005 ****61.25

400194[illegible]

DOCUMENT # 708588

1. Entity Name
THE JUNIOR LEAGUE OF THE EMERALD COAST, INC.

Principal Place of Business	Mailing Address
12 SE MIRACLE STRIP SUITE 201 FORT WALTON BEACH, FL 32548	PO BOX 531 FORT WALTON BEACH, FL 32549

01172008 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
12 SE Miracle Strip Pkwy P.O. Box 531	
Suite, Apt. #, etc. Apt. 201	Suite, Apt. #, etc.
City & State Fort Walton Beach 32548	City & State FWB, FL. 32549
Zip / Country 32548	Zip / Country 32549

4. FEI Number
59-2049326
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
BARR, HARRY E. 1201 N. ESLIN PKWY SHALIMAR, FL 32579	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD COTTON, JULIE 749 VINTAGE CIRCLE DESTIN, FL 32541	☒ Delete	PD CLAIRE PARTAIN 610 CARRIBBEAN WAY NICEVILLE, FL. 32578	☐ Change ☐ Addition XX
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD PARTAIN, CLAIRE 610 CARIBBEAN WAY NICEVILLE, FL 32578	☐ Delete	PD CARRIE CHAVERS 923 Village Lane Fort Walton Beach, FL. 32547	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD FERREIRA, MICHELLE 188 FOX VALLEY ROAD SHALIMAR, FL 32579	☒ Delete	TD LEE CURTIS 260 Chipola Cove Destin, FL. 32541	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD MCDOWELL, JENNY 239 INVERRAY DRIVE DESTIN, FL 32541	☒ Delete	PD Peggy Nehring 1627 Ella Ruth DRive Fort Walton Beach, FL. 32547	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD COLLIER, PAIGE 2808 SAM SNEAD COURT SHALIMAR, FL 32579	☒ Delete	SD LAUREN VEAL 15 Anastasia Drive Fort Walton Beach, FL. 32548	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD CHAVERS, CARRIE 923 VILLAGE LANE FORT WALTON BEACH, FL 32547	☐ Delete	SD BETH MARKS 472 Jillian Drive Crestview, FL. 32536	☐ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 1/22/08 (850) 8338265
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #