2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 30, 2003 8:00 am
Secretary of State
01-30-2003 90134 038 ****61.25

DOCUMENT # 708588

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

JUU13713

☐ CHECK HERE IF MAKING CHANGES

Principal Place of Business	Mailing Address
P.O. BOX 531 FORT WALTON BEACH FL 32549	P.O. BOX 531 FORT WALTON BEACH FL 32549

2. Principal Place of Business	3. Mailing Address
	786 North Beal Parkway
Suite, Apt. #, etc. Suite 4-A	Suite, Apt. #, etc. Suite 4-A
City & State	City & State Fort Walton Beach, FL
Zip / Country	Zip 32547 / Country

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

FILE NOW: FEE IS $61.25

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 GHOSH, JERI 902 AVALON LANE SHALIMAR FL 32579	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD BALENT, ANGELA 28 Country Club Road Shalimar, FL 32579	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD BALENT, ANGELA 28 COUNTRY CLUB ROAD SHALIMAR FL 32579	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD IZER, STACEY 44 BERWICK CIRCLE #3 SHALIMAR, FL. 32579	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD FEMIA, SANDRA 507 SIOUX CIRCLE FORT WALTON BEACH FL 32547	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD BARKOCY, ASHLEY 2352 Twin Bay View Fort Walton Beach, FL. 32547	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD WARD, LORI 800 EAST HEWETT ROAD SANTA ROSA BEACH FL 32459	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD HERMAN, PAMELA 4438 Southminster Circle Niceville, FL. 32578	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD SINER, ASHLEY 2588 DANA COURT SHALIMAR FL 32579	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD PONDER, MONA 3994 Lauren Ct. Destin, FL. 32541	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/02)

12. 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 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: Cynthia Barr SIGNATURE REQUIRED 1/28/02 850-678-8886