

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 712237

1. Entity Name

JUNIOR SERVICE LEAGUE OF DELAND, INC.

FILED
May 24, 2000 8:00 am
Secretary of State

05-24-2000 90044 004 ****61.25

Principal Place of Business 696 WEST NEW YORK AVENUE P.O. BOX 1372 DELAND FL 32721-1372	Mailing Address 696 WEST NEW YORK AVENUE P.O. BOX 1372 DELAND FL 32721-1372
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business P.O. Box 1372 Suite, Apt. #, etc.	3. Mailing Address P.O. Box 1372 Suite, Apt. #, etc.
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City & State DeLand, FL	City & State DeLand, FL	4. FEI Number 59-6146126	Applied For <input type="checkbox"/> Not Applicable
Zip 32721	Country USA	Zip 32721	Country USA

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

HURSTON, JOAN
 2321 EAST NEW YORK AVE
 DELAND FL 32724

7. Name and Address of New Registered Agent

Name: Ebert, Freda
 Street Address (P.O. Box Number is Not Acceptable):
 1550 Wyngate Dr.
 City: DeLand, FL Zip Code: 32724

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.

SIGNATURE: Freda Ebert, Treasurer DATE: 5-1-00

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

FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS

TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	MERRIMAN, WENDY	
STREET ADDRESS	227 LAKE WINNESMISSETT DR	
CITY-ST-ZIP	DELAND FL 32724	
TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	DUNN, DEBBIE	
STREET ADDRESS	510 W. MINNESOTA AVE.	
CITY-ST-ZIP	DELAND FL	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	GALLOWAY, MARY ELLEN	
STREET ADDRESS	2510 LAKE RUBY RD	
CITY-ST-ZIP	DELAND FL 32724	
TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	HURSTON, JOAN	
STREET ADDRESS	1745 GLENWOOD RD	
CITY-ST-ZIP	DELAND FL 32720	
TITLE	VD	<input type="checkbox"/> Delete
NAME	DEMARSH, DONA	
STREET ADDRESS	2207 OAK HILL DRIVE	
CITY-ST-ZIP	DELAND FL 32720	
TITLE	TD	<input type="checkbox"/> Delete
NAME	CARTER, LISA	
STREET ADDRESS	19 TYMBER COVE	
CITY-ST-ZIP	DELAND FL	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Carter, Lisa	
STREET ADDRESS	19 TYMBER COVE	
CITY-ST-ZIP	DELAND, FL 32724	
TITLE	VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	De Marsh, Dona	
STREET ADDRESS	2207 Oak Hill Dr.	
CITY-ST-ZIP	DELAND, FL 32720	
TITLE	VD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Ziebarth, Janet	
STREET ADDRESS	2056 Pennsylvania Dr.	
CITY-ST-ZIP	DELAND, FL 32724	
TITLE	VD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Barker, Sandy	
STREET ADDRESS	1525 Perrywinkle Dr.	
CITY-ST-ZIP	DELAND, FL 32724	
TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Perryman, Kay	
STREET ADDRESS	3425 Marsh Rd.	
CITY-ST-ZIP	DELAND, FL 32724	
TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Hopkins, Michelle	
STREET ADDRESS	1715 Stone Rd.	
CITY-ST-ZIP	Glenwood, FL 32720	

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: Freda Ebert Freda Ebert 5/1/00 904-734-9171

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)

0009-1498
712237

11. Additions/Changes to Officers and Directors in 10

Title: T/D (Addition)
Name: Ebert, Freda
Street Address: 1550 Wyngate Dr.
City, St. Zip: DeLand, FL 32724