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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

NONPROFIT CORPORATION ANNUAL REPORT 1997

FLORIDA DEPARTMENT OF STATE  
*SARAH B. MORTHAM*  
Secretary of State  
DIVISION OF CORPORATIONS



DOCUMENT # 741443 (6)  
1. Corporation Name  
THE JUNIOR SERVICE LEAGUE OF BROOKSVILLE, INC.



Principal Place of Business Mailing Address  
20 E. LIBERTY ST. PO BOX 936 BROOKSVILLE FL 34605  
20 E. LIBERTY ST. PO BOX 936 BROOKSVILLE FL 34605-0936

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip Country 28 Zip Country  
24 25 29 30

3. Date Incorporated or Qualified 01/25/1978 3a. Date of Last Report 03/28/1996  
4. FEI Number 59-1232904 Applied For Not Applicable  
5. Certificate of Status Desired  \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent  
MOSHER, DONNA  
1351 CANDLELIGHT BLVD  
BROOKSVILLE FL 34601

10. Name and Address of New Registered Agent  
81 Name Sharon O. Taylor  
82 Street Address (P.O. Box Number is Not Applicable) 13209 Old Crystal River Rd  
83  
84 City Brooksville FL 85 Zip Code 34601

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *Sharon O. Taylor* (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VP WHEELS, JENNIFER 7020 OLD TRILBY RD BROOKSVILLE FL	<input checked="" type="checkbox"/> DELETE	1.1 TITLE VP Nancy Lovelock 1114 Bentley Ave. Spring Hill, FL 34609
NAME	P SHIVELER, LISA 801 DARBY LN BROOKSVILLE FL	<input checked="" type="checkbox"/> DELETE	2.1 TITLE P Joannah Holt P.O. Box Brooksville, FL. 34605
STREET ADDRESS	D CHAMPAGNE, LEE ANN 1369 SABRA DR BROOKSVILLE FL	<input checked="" type="checkbox"/> DELETE	2.2 NAME D OLuAnne Stout 621 Prospect Hill Ct. Brooksville, FL. 34601
CITY-ST-ZIP	D HARRIS, DEBRA 8454 WEATHERLY RD BROOKSVILLE FL	<input checked="" type="checkbox"/> DELETE	2.3 STREET ADDRESS D Kelly Harris 606 Moline St. Brooksville, FL. 34601
CITY-ST-ZIP	D BOOKER, LAURA 321 SILAS CT SPRING HILL FL	<input checked="" type="checkbox"/> DELETE	2.4 CITY-ST-ZIP D Kim Lashley 217 Alpine Circle Brooksville, FL. 34601
CITY-ST-ZIP	T MOSHER, DONNA 1351 CANDLELIGHT BLVD. BROOKSVILLE FL	<input checked="" type="checkbox"/> DELETE	2.4 CITY-ST-ZIP T Leeann Champagne 1369 Sabra Dr. Brooksville, FL. 34601

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14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

*Leeann Champagne*

CR2E037 (9/96)