2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Mar 08, 2007 8:00 am **Secretary of State DOCUMENT #756501** 03-08-2007 90006 013 ****61.25 THE JUNIOR SERVICE LEAGUE OF PANAMA CITY, INC. Principal Place of Business Mailing Address 911 CHERRY ST. P.O. BOX 743 P. O. BOX 743 P. O. BOX 743 PANAMA CITY, FL 32402-0743 US PANAMA CITY, FL 32402-0743 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03072007 Chg-NP CR2E037 (12/06) City & State 4. FEI Number 59-6152202 City & State Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent DavidenKo HANEY, SCOTTI 1806 CONNECTICUT AVE Street Address (P.O. Box Number is Not Acceptable) LYNN HAVEN, FL 32444 Longleaf Zip Code 3 2 4 0 S Pana<u>ma</u> 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. (Laura 6-Danider16) SIGNATURE Filing Fee Is \$61.25 9. Election Campaign Financing Make check payable to \$5.00 May Be Trust Fund Contribution. Due by May 1, 2007 Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 PE TITLE Delete Haney, Scotti 1806 Connecticut, Ave TITLE NAME BOYD, CILLIE NAME STREET ADDRESS 206 S. HARRIS AVE. STREET ADDRESS PANAMA CITY, FL 32401 Lynn Haven, 12 32444 CITY-ST-ZIP CITY-ST-7IP TITI F Delete TITLE AFT Oakes, Tracey Dan Trace NAME HAIMAN, BRANDY STREET ADDRESS PO BOX 15521 STREET ADDRESS Panama City Beach, FL 32413 CITY-ST-ZIP PANAMA CITY, FL 32406 CITY-ST-7IP TITLE TELLE Delete Boyd, Cille Defiange [294,5 Harris Ave Panama City, Pl 3241/ SOUTHERLAND, CAROL NAME NAME STREET ADDRESS 105 FLEMING CT STREET ADDRESS CITY-ST-ZIP LYNN HAVEN, FL 32444 CITY-ST-ZIP TITLE CS Delete TITLE 2805 Lingleaf Rd. Panama City, FL SHARP, TANYA NAME NAME STREET ADDRESS P.O. BOX 135 STREET ADDRESS CITY-ST-7IP LYNN HAVEN, FL 32444 eny-st-zip 3 2405 TITLE Change eiffer, Angela DAVIDENKO, LAURA NAME NAME P.O. Box 27028 fanama City Bouch, PC 32411 STREET ADDRESS 2805 LONGLEAF RD STREET ADDRESS CITY-ST-ZIP PANAMA CITY, FL 32405 CITY-ST-ZIP Trumbuli, Tammy 2708 Longier Rd Panama City, Pa 3240 ☐ Delete TITLE NAME HANEY, SCOTTI NAME STREET ADDRESS 1806 CONNECTICUT AVE STREET ADDRESS

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. Laura G Davidenko

CITY-ST-ZIP

SIGNATURE: Allua N

LYNN HAVEN, FL 32444

CITY-ST-7IP

Danderto reasure SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED