

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 712237

Entity Name: JUNIOR SERVICE LEAGUE OF DELAND, INC.**Current Principal Place of Business:**2344 DARTMOUTH RD
DELAND, FL 32724**Current Mailing Address:**P.O. BOX 1372
DELAND, FL 32721**FEI Number:** 59-6146126**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CRICHE, LOREN V
6 REYES ROAD
DELAND, FL 32724 US*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:** LOREN V CRICHE

04/17/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name HENDERSON, PATE
Address 437 N FAIRVIEW AVE
City-State-Zip: DELAND FL 32724

Title TREASURER
Name CRICHE, LOREN
Address 2344 DARTMOUTH RD
City-State-Zip: DELAND FL 32724

Title VP, 1ST
Name REYNOLDS, LACEY
Address 68 LANTANA DR
City-State-Zip: DEBARY FL 32713

Title VP, 3RD
Name DEMICHEAL, CHRISTINE
Address 221 S STONE STREET
City-State-Zip: DELAND FL 32720

Title VP, 2ND
Name SNOW, JESSICA
Address 129 DOGWOOD AVE
City-State-Zip: ORANGE CITY FL 32763

Title RECORDING SECRETARY
Name WARDWELL, JACKIE
Address 1205 BRAMLEY LANE
City-State-Zip: DELAND FL 32720

Title CORRESPONDING SECRETARY
Name HAGSTROM, STEPHANIE
Address PO BOX 776
City-State-Zip: PIERSON FL 32180

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: LOREN V CRICHE

TREASURER

04/17/2014

Electronic Signature of Signing Officer/Director Detail

Date