2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 18, 2007 8:00 am
Secretary of State
05-18-2007 90027 043 ****61.25

DOCUMENT # 700191

1. Entity Name

THE JUNIOR LEAGUE OF PENSACOLA, FLORIDA, INCORPORATED

Principal Place of Business	Mailing Address
3298 SUMMIT BOULEVARD, SUITE 44 PENSACOLA FL 32503-1319	3298 SUMMIT BOULEVARD, SUITE 44 PENSACOLA FL 32503-1319

1st MOORE CR2E037 (10/06)

2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-6166684 ☐ 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
CARPER, TRACYE L 4521 PIPER GLEN DR PENSACOLA FL 32514	Name LAURA LYKINS Street Address (P.O. Box Number is Not Acceptable) 10059 FOX RUN RD City PENSACOLA FL Zip Code 32514

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 Laura Lykins 4/18/07
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
Due By May 1, 2007

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	P LYKINS, LAURA G 10059 FOX RUN RD PENSACOLA FL 32514	☑ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT CATHERINE SUFFICH 3614 TIGER POINT BLVD GULF BREEZE FL 32563	☑ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PE SUFFICH, CATHERINE 3614 TIGER POINT BLVD GULF BREEZE FL 32563	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT ELECT NICHELLE LEE 5880 A SPANISH TR PENSACOLA FL 32504	☑ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T JONES, ALLISON 7657 CHARTER OAKS DR PENSACOLA FL 32514	☑ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER JENA OVERSTREET 321 E GADSDEN ST PENSACOLA FL 32501	☑ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TE AURTS, TASHA 7890 WEIRLOOM DR PENSACOLA FL 32514	☑ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER ELECT LYNN NOBBS 1515 WHITE CAPS PENSACOLA FL 32507	☑ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MVP LEE, MICHELLE 5880 A SPANISH TR PENSACOLA FL 32504	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MEMBERSHIP VP KARA RICH 3121 LINDEN AVE GULF BREEZE FL 32563	☑ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ES NOSMAN, IDI 2054 JUNO CIR PENSACOLA FL 32526	☑ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	EXECUTIVE SECRETARY KRIS KELLY 1604 LLANI CT GULF BREEZE FL 32563	☑ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.

SIGNATURE: Laura B. Suffich
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #