2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 07, 2008 8:00 am
Secretary of State
05-07-2008 90113 022 ****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 (10/07)

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
LYKINS, LAURA 10059 FOX RUN RD. PENSACOLA FL 32514	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 4/9/08
Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when mailing) DATE

FILE NOW: FEE IS $61.25
Due By May 1, 2008

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 SUFFICH, CATHERINE 3614 TIGER POINT BLVD. GULF BREEZE FL 32563	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT LEE, MICHELLE 5880-A SPANISH TR PENSACOLA, FL 32504	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PE LEE, MICHELLE 5880 A SPANISH TRAIL PENSACOLA FL 32504	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT-ELECT HOSMAN, EDI 2054 JUNO CIR PENSACOLA FL 32526	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T OVERSTREET, JENA 321 E. GADSDEN ST. PENSACOLA FL 32501	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TREASURER HOBBS, LYNN 1535 WHITE CAPS PENSACOLA, FL 32507	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TE NOBBS, LYNN 1535 WHITE CAPS PENSACOLA FL 32507	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TREASURER-ELECT STEELE, ALICIA 1900 SCENIC HWY UNIT 2 PENSACOLA FL 32503	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MVP RICH, KARA 3121 LINDEN AVE. GULF BREEZE FL 32563	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MEMBERSHIP VP JOHNSON, RACHAEL 1564 STANFORD DR GULF BREEZE FL 32563	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ES KELLY, KRIS 1604 LLANI CT. GULF BREEZE FL 32563	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	EXECUTIVE SECRETARY WINERI, ROSEMARY 1004 CHANDELLE LAKE DR PENSACOLA, FL 32507	☑ 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