2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 700191

Apr 23, 2009 Secretary of State

Entity Name: THE JUNIOR LEAGUE OF PENSACOLA, FLORIDA, INCORPORATED

Current Principal Place of Business: New Principal Place of Business:

3298 SUMMIT BOULEVARD, SUITE 44 3298 SUMMIT BOULEVARD PENSACOLA, FL 325031319

SUITE 44

PENSACOLA, FL 32503

Current Mailing Address: New Mailing Address:

3298 SUMMIT BOULEVARD, SUITE 44 3298 SUMMIT BOULEVARD PENSACOLA, FL 325031319

SUITE 44

PENSACOLA, FL 32503

FEI Number: 59-6166684 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LYKINS, LAURA THORSEN, LEXIE 10059 FOX RUN RD. 1113 SUSSEX LN

PENSACOLA, FL 32514 US PENSACOLA, FL 32514 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: LEXIE THORSEN 04/23/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

PENSACOLA, FL 32507

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PENSACOLA, FL 32503

() Delete (X) Change () Addition

LEE, MICHELLE HOSMAN, ILDI Name: Name: 5880-A SPANISH TR Address: 2054 JUNO CIR Address: PENSACOLA, FL 32504

City-St-Zip: City-St-Zip: PENSACOLA, FL 32526

Title: Title: (X) Change () Addition () Delete HOSMON, ILDI Name: EDWARDS, MANDI Name: Address: 2054 JUNO CIR Address: 1841 COPLEY DR

City-St-Zip: PENSACOLA, FL 32526 City-St-Zip: PENSACOLA, FL 32503

Title: () Delete Title: (X) Change () Addition HOBBS, LYNN STEELE, ALICIA Name: Name:

15835 WHITE CAPS 1900 SCENIC HWY UNIT 2 Address: Address: City-St-Zip: PENSACOLA, FL 32507 City-St-Zip: PENSACOLA, FL 32503

(X) Change () Addition Title: () Delete Title: ΤE TE

AARTS, TATIA Name: STEELE, ALILA Name:

1900 SCENIC HWY UNIT 2 1210 CONFERENCE RD Address: Address: City-St-Zip: PENSACOLA, FL 32503 City-St-Zip: CANTONMENT, FL 32533

Title: () Delete Title: (X) Change () Addition JOHNSON, RACHAEL LOISELLE, MARYANN

Name: Name: 1364 STANFORD DR 4344 LANGLEY AVE Address: Address: City-St-Zip: GULF BREEZE, FL 32563 City-St-Zip: PENSACOLA, FL 32504

Title: () Delete Title: (X) Change () Addition

WINERI, ROSEMARY LEE, LAURA Name: Name: Address: 1064 CHANDELLE LAKE DR Address: 1403 E HERNANDEZ ST

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

City-St-Zip:

SIGNATURE: LEXIE THORSEN ED 04/23/2009

Electronic Signature of Signing Officer or Director

Date