2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Aug 09, 2011 **DOCUMENT# 705297** Secretary of State

Entity Name: THE JUNIOR WELFARE SOCIETY

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

P. O. BOX 39646 1220 N RIO VISTA BLVD

FT. LAUDERDALE, FL 333399646 US FT. LAUDERDALE, FL 33301 US

Current Mailing Address: New Mailing Address:

P. O. BOX 39646 P.O. BOX 39646

US

FT. LAUDERDALE, FL 333399646 US FORT LAUDERDALE, FL 333399646

FEI Number: 59-6159092 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:

CALDWELL, ELIZABETH MRS. 1220 NORTH RIO VISTA BLVD FORT LAUDERDALE, FL 33301

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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

BARBER, KIMBERLY Name:

Address: 100 SOUTH BIRCH ROAD #PH2900 City-St-Zip: FORT LAUDERDALE, FL 33316 US

Title: V/D

Name: HANSEN, MARIE CAMP Address: 2609 HIBISCUS PLACE

City-St-Zip: FORT LAUDERDALE, FL 33301 US

Title: S/D

YATES, CHRISTINE Name: Address: 2849 NE 28TH STREET

City-St-Zip: FORT LAUDERDALE, FL 33306 US

Title: T/D

Name: CALDWELL, ELIZABETH Address: 1220 NORTH RIO VISTA BLVD City-St-Zip: FORT LAUDERDALE, FL 33301 US

AT/D Title:

POOLE, MARGARET Name: 702 NORTH RIO VISTA BLVD Address: FORT LAUDERDALE, FL 33301 US City-St-Zip:

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: ELIZABETH CALDWELL T/D 08/09/2011