

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 705650

FILED
Feb 12, 2008
Secretary of State

Entity Name: THE JUNIOR LEAGUE OF GREATER LAKELAND, FLORIDA INCORPORATED

Current Principal Place of Business:

90 LAKE MORTON DR.
LAKELAND, FL 33801 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 8797
LAKELAND, FL 338068797 US

New Mailing Address:

FEI Number: 59-6138219

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STUART, JANET
ONE LAKE MORTON DR
LAKELAND FL., FL 33801 US

Name and Address of New Registered Agent:

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:

Title: VPD () Delete
Name: GONZALEZ-DOCKERY, ALINA
Address: 1528 DEL CREST PLACE
City-St-Zip: LAKELAND, FL 33803

Title: PD () Delete
Name: STEPHANIE, MCLEAN
Address: 408 PRADO PLACE
City-St-Zip: LAKELAND, FL 33803

Title: TD () Delete
Name: MCLAUGHLIN, STACEY
Address: 5718 COVEVIEW DR E
City-St-Zip: LAKELAND, FL 33813

Title: VTD () Delete
Name: ELMHORST, KIMBERLY
Address: 2370 MILES COURT
City-St-Zip: LAKELAND, FL 33813

Title: SD () Delete
Name: MASON, LINDA
Address: 4932 IRONWOOD TRAIL
City-St-Zip: BARTOW, FL 33830

Title: SD () Delete
Name: PARKER-HOPKINS, SAMANTHA
Address: 6417 ASHLEY DRIVE
City-St-Zip: LAKELAND, FL 33813

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change () Addition
Name: MCLAUGHLIN, STACEY
Address: 5718 COVEVIEW DR. EAST
City-St-Zip: LAKELAND, FL 33813

Title: PD (X) Change () Addition
Name: GONALEZ-DOCKERY, ALINA
Address: 1528 DL CREST PLACE
City-St-Zip: LAKELAND, FL 33803

Title: TD (X) Change () Addition
Name: WILLIAMS, JOY
Address: 6002 CRICKET DR
City-St-Zip: LAKELAND, FL 33813

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: STACEY MCLAUGHLIN

VPD

02/12/2008

Electronic Signature of Signing Officer or Director

Date