

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 22, 2004 8:00 am
Secretary of State

04-22-2004 90046 020 ****61.25

DOCUMENT # 707142
 1. Entity Name
THE JUNIOR LEAGUE OF ST. PETERSBURG FLA., INCORPORATED



Principal Place of Business Mailing Address
340 ROWLAND CT. NE **340 ROWLAND CT. NE**
ST PETERSBURG FL 33701 **ST PETERSBURG FL 33701**
US **US**

01000001



MOORE CR2E037 (11/03)

2. Principal Place of Business 3. Mailing Address
1 Beach Drive SE **1 Beach Drive SE**
 Suite, Apt. #, etc. Suite, Apt. #, etc.
#210 **#210**

City & State City & State
St. Petersburg FL **St. Petersburg FL**

4. FEI Number Applied For
59-0759485 Not Applicable

Zip Country Zip Country
33701 **US** **33701** **US**

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
ABNAO, SHANNON
231.16TH AVE. NE
SAINT PETERSBURG FL 33704

7. Name and Address of New Registered Agent
 Name **Jane Graves**
 Street Address (P.O. Box Number is Not Acceptable)
308 - 37TH AVENUE NE
 City **St. Petersburg** FL Zip Code **33704**

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 **Jane Graves, President** DATE **4/20/04**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

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	
TITLE VPD	MATTERN, GEORGIA 421 SHELL ISLE BLVD NE SAINT PETERSBURG FL 33704 <input checked="" type="checkbox"/> Delete
TITLE VPD	ABNAO, SHANNON 231 16TH AVE. NE SAINT PETERSBURG FL 33704 <input checked="" type="checkbox"/> Delete
TITLE SD	WILLET, CAROLYN 1220 46TH AVE. N. SAINT PETERSBURG FL 33703 <input checked="" type="checkbox"/> Delete
TITLE S	MCCURLEY, JANETTE 11650 CAPRI CIRCLE SOUTH SAINT PETERSBURG FL 33706 <input checked="" type="checkbox"/> Delete Keep
TITLE TD	DANIELS, SUCHI PO BOX 117 TERRA CEIA FL 34250 <input checked="" type="checkbox"/> Delete
TITLE TD	BOND, KIM 7330 14TH STREET NE SAINT PETERSBURG FL 33702 <input checked="" type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE VPD	Shannon Arnao 231 16TH AVE NE St. Petersburg, FL 33704 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE VPD	Jane Graves 308-37TH AVENUE NE St. Petersburg, FL 33704 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE SD	Kimberly Tomko 763 - 23RD AVENUE N. St. Petersburg, FL 33704 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE TD	Kim Bond 7330 14TH ST NE St. Petersburg, FL 33702 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE TD	Linda Punzak 1310 45TH AVENUE N. St. Petersburg FL 33703 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: **Kimberly Bond** **Kimberly Bond** DATE **4/20/04** DAYTIME PHONE # **(727)895-5018**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR