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May 20 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morikhan  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 707355 (4)

1. Corporation Name  
JUNIOR LEAGUE OF DAYTONA BEACH, INC.



Principal Place of Business Mailing Address  
200 ORANGE AVE DAYTONA BEACH FL 32114 US  
200 ORANGE AVE DAYTONA BEACH FL 32114-4312 US

3. Date Incorporated or Qualified 05/26/1964  
3a. Date of Last Report 03/27/1996  
4. FEI Number 23-7013995  
Applied For Not Applicable  
5. Certificate of Status Desired  \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip 24 Country 25 28 Zip 29 Country 30

9. Name and Address of Current Registered Agent  
GOODSON, RHODA B.  
220 S. RIDGEWOOD AVENUE  
DAYTONA BEACH FL 32114

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	ALLEN, DEBORAH B	
STREET ADDRESS	P.O. BOX 2932 N/A	
CITY-ST-ZIP	ORMOND BEACH FL 32175	
TITLE	VPD	<input checked="" type="checkbox"/> DELETE
NAME	UPCHURCH, ROSARIA	
STREET ADDRESS	7 BROADRIVER ROAD	
CITY-ST-ZIP	ORMOND BEACH FL	
TITLE	TD	<input checked="" type="checkbox"/> DELETE
NAME	MCFARLAND, KATHLEEN	
STREET ADDRESS	255 COQUINA AVE	
CITY-ST-ZIP	ORMOND BCH FL	
TITLE	VD	<input checked="" type="checkbox"/> DELETE
NAME	ALLEN, DEBORAH B.	
STREET ADDRESS	PO BOX 2932 N/A	
CITY-ST-ZIP	ORMOND BEACH FL	
TITLE	TD	<input checked="" type="checkbox"/> DELETE
NAME	MILTHORPE, KATHRYN H.	
STREET ADDRESS	6 LEISURE WOOD WAY	
CITY-ST-ZIP	ORMOND BEACH FL	
TITLE	TD	<input checked="" type="checkbox"/> DELETE
NAME	LYDECKER, CHRISTINE	
STREET ADDRESS	18 BROADRIVER RD.	
CITY-ST-ZIP	ORMOND BEACH FL 32174	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Co-President (D)	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Janet Holtgrewe	
1.3 STREET ADDRESS	715 Tarry Town Trail	
1.4 CITY-ST-ZIP	Port Orange, FL 32127	
2.1 TITLE	Co-President (D)	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Inez Marchand	
2.3 STREET ADDRESS	1998 Country Club Dr.	
2.4 CITY-ST-ZIP	Daytona Beach, FL 32118	
3.1 TITLE	President Elect (D)	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Julie Rand	
3.3 STREET ADDRESS	118 N. St. Andrews St.	
3.4 CITY-ST-ZIP	Ormond Beach, FL 32174	
4.1 TITLE	Recording Secretary	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Kim Brookfield	
4.3 STREET ADDRESS	405 Muddy Creek Ln.	
4.4 CITY-ST-ZIP	Ormond Beach, FL 32174	
5.1 TITLE	Treasurer (D)	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	Cyndi Ritchey	
5.3 STREET ADDRESS	59 Dagget Cove	
5.4 CITY-ST-ZIP	Ponce Inlet, FL 32127	
6.1 TITLE	Treasurer Elect (D)	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	Claudia Indelicato	
6.3 STREET ADDRESS	3246 Vail View Dr.	
6.4 CITY-ST-ZIP	Daytona Beach, FL 32124	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

CR2E037 (9/96)