

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 707355

1. Entity Name

JUNIOR LEAGUE OF DAYTONA BEACH, INC.

FILED
Mar 16, 2000 8:00 am
Secretary of State

03-16-2000 90090 039 ****61.25

Principal Place of Business

Mailing Address

122 S PALMETTO AVE
DAYTONA BEACH FL 32114
US

122 S PALMETTO AVE
DAYTONA BEACH FL 32114-4320
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **23-7013995**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GOODSON, RHODA B.
220 S. RIDGEWOOD AVENUE
DAYTONA BEACH FL 32114

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PED
DAVENPORT, CINDY
104 HOBLE LANE
ORMOND BCH FL 32174 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
TALLENT, DEBBIE
1205 TERRA FIRMA TR
DELAND FL 32724 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PED
BARBARA COLEMAN
305 JOHN ANDERSON DRIVE
ORMOND BEACH FL 32176 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
RSD
ABATE, NANCY
21 FOX FORDS CHASE
ORMOND BCH FL 32174 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
RSD
KIM MARTIN
2611 CONCORD PL
DELAND FL 32720 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
YUSCHOK, CONSTANCE
162 LAURELWOOD LANE
ORMOND BCH FL 32174 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TED
ANN PINTILIANO
11 GOLDEN GATE CIRCLE
PORT ORANGE FL 32119 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TED
SELIG, BARBARA
30 BRYAN CAVE RD
S DAYTONA FL 32119 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

Deborah B. Talient **DEBORAH B. TALLENT** **PRESIDENT** **03-07-00** **738-5477**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

03-17-1999