

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 707355

1. Entity Name

JUNIOR LEAGUE OF DAYTONA BEACH, INC.

Principal Place of Business

122 S PALMETTO AVE
DAYTONA BEACH FL 32114
US

Mailing Address

122 S PALMETTO AVE
DAYTONA BEACH FL 32114
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

23-7013995

Applied For

Not Applicable

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	PD DAVENPORT, CINDY 104 HOBLE LANE ORMOND BCH FL 32174	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PED COLEMAN, BARBARA 305 JOHN ANDERSON DR ORMOND BEACH FL 32176	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	RSD MARTIN, KIM 2611 CONCORD PL DELAND FL 32720	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TED PINTILIANO, ANN 11 GOLDEN GATE CIR DAYTONA BEACH FL 32119	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SELIG, BARBARA 30 BRYAN CAVE RD S DAYTONA FL 32119	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD COLEMAN, BARBARA 305 John Anderson Dr. Ormond Beach FL 32176	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PED SPENCER, MARY 513 RIVERVIEW BLVD. DAYTONA BEACH FL 32118	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	RSD GERNERT, HEATHER 922 NORTH BROOK DR. ORMOND BEACH FL 32174	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TED KRAFT, PATTY 6 ECLIPSE TRAIL ORMOND BEACH FL 32174	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD PINTILIANO, ANN 11 GOLDEN GATE DR. DAYTONA BEACH FL 32119	☒ Change ☐ Addition
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:

SIGNATURE REQUIRED

Date

Daytime Phone #

CR2E037 (10/00)

FILED
Mar 22, 2001 8:00 am
Secretary of State

03-22-2001 90055 008 ****61.25



DO NOT WRITE IN THIS SPACE