2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 03, 2006
Secretary of State

DOCUMENT# 711054

Entity Name: JUNIOR SERVICE LEAGUE OF BARTOW, INC.

Current Principal Place of Business:

P.O. BOX 1523
BARTOW, FL 33831 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1523
BARTOW, FL 33831 US

New Mailing Address:

FEI Number: 59-6200941 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BROOKS, MARCIA
1280 S. FIRST AVENUE
BARTOW, FL 33830 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:	PTD	( ) Delete
Name:	BROOKS, MARCIA	
Address:	1280 S. FIRST AVE.	
City-St-Zip:	BARTOW, FL 33830	
Title:	TD	( ) Delete
Name:	BROOKS, MARCIA	
Address:	1280 S. FIRST AVE.	
City-St-Zip:	BARTOW, FL 33830	
Title:	VTP	( ) Delete
Name:	GABLE, ARLENE	
Address:	P. O. BOX 1523	
City-St-Zip:	BARTOW, FL 33831	
Title:	TD	( ) Delete
Name:	MCMILLIN, MARIANNE	
Address:	1040 TRASK LANE	
City-St-Zip:	BARTOW, FL 33830	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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 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: MARIANNE MCMILLIN TD 04/03/2006
Electronic Signature of Signing Officer or Director — Date