FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT
1996

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

DOCUMENT # **713493** **(5)**

1. Corporation Name

JUNIOR LEAGUE OF CENTRAL & NORTH BREVARD, INC.

Principal Place of Business	Mailing Address
442 MAGNOLIA AVE. APT. 25 MERRITT ISLAND FL 32952	P.O. BOX 538 COCOA FL 32923

3. Date Incorporated or Qualified: **10/19/1967**
3a. Date of Last Report: **04/10/1995**

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

4. FEI Number: **23-7117325** ☐ 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

9. Name and Address of Current Registered Agent

CANADA, TRACEY
539 HIDDEN HOLLOW DR.
MERRITT ISLAND FL 32952

10. Name and Address of New Registered Agent

81 Name: Kelly Harville
82 Street Address (P.O. Box Number is Not Acceptable): 205 Tradewinds Drive
83: N/A
84 City: Indian Harbor Beach **FL** 85 Zip Code: 32937

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: Kelly Hamble - Treasurer - Elect — DATE: 4/17/96
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD CANADA, TRACEY 539 HIDDEN HOLLOW DR. MERRITT ISLAND FL	☒ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	TD RPEB HARVILLE, KELLY 205 TRADEWINDS DR. INDIAN HARBOR, FL 32937	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD THOMPSON, MINDY 1418 GLENEAGLES WAY ROCKLEDGE FL	☒ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	SD BRAMLEY, JENNIFER 1227 SUGAR CREEK LN ROCKLEDGE, FL 32955	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD HANSKUTT, CATHY 3172 WINNIPEG CT. MELBOURNE FL	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	VD HANSKUTT, CATHY SEE BOX 12	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD CRANE, ANN 1890 N. ATLANTIC AVE., A506 COCOA BEACH FL	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	PD CRANE, ANNE SEE BOX 12	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CLARK, LIBBY 1344 GLENEAGLES WAY ROCKLEDGE FL	☒ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	SD ARNOLD, TERRY 515 HARWOOD AVE. SATELITE BEACH, FL 32937	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BIRD, JERILYN 1983 S. ROCKLEDGE DR. ROCKLEDGE FL	☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	VD BIRD, JERILYN SEE BOX 12	☒ Change ☐ Addition

#pep by Bank 4.17

4/24/96 JR

CR2E037 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE: Kelly Hamble - Treasurer-Elect — 3-2-96 — 452-3636
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #